		<del></del>	
		1	APPEARANCES
		2	
	1 IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF MISSOURI	3	Wendler Law, P.C.
1	2 EASTERN DIVISION 3	1.	By: Brian Wendler, Esq.
	4 IAN WALLCE,	4	For the Plaintiff
	5 Plaintiff,	5	
	6 vs. Ho. R4:18~cv-1059 PLC	6	
	7 PHARMA MEDICA RESEARCH, INC.,		Hinshaw & Culbertson LLP
	8 Defendants.	7	By: Terese A. Drew, Esq.
Ì	Ď j	8	For the Dafendants
	10 DEPOSITION OF 11	0	
	12 HEATHER GORDAN, M.D.		
	13	10	Also Present:
ŀ	14 Taken on behalf of Plaintiff	11	May Fraudici.
1	15	12	Ian Wallace, Plaintiff
	16 <u>July 30, 2019</u>	1 '	AND TOTAL OF THE INTEREST
	17	13 14	Dr. Shabaz Khan, vla telephone
	18 Reporter: Kimberly A. Harrie, CSR 19	15	
	20	18 17	
	21	18	
	22 MAY REPORTING SERVICE	19	
	598 Watch Hill Road 23 Collinsville, Illinols 62234 618-223-8392	21	
	24	22 23	
	Nay Reporting Service	24	
			Mou Flanavilla Carutas
1	THOSE OF SVANIANTANA	1	May Reporting Service STIPULATION
2	INDEX OF EXAMINATIONS PAGE LINE	2	IT IS STIPULATED AND AGREED by and between
3	Examination by Mr. Wendler 6 6	3	counsel for Plaintiffs and counsel for Defendants
4		4	that the deposition of HEATHER JORDAN, M.D., may be
Б	INDEX OF EXHIBITS	δ	taken pursuant to Rule 26(a) of the Federal Rules of
6	PAGE LINE	6	Civil Procedure on behalf of the Plaintiff, on July
7	Plaintiff's Exhibit No. 1	7	30, 2019 at the offices of Hinshaw & Culbertson LLP,
8	Plaintiff's Exhibit No. 2 28 7	8	701 Market Street, Suite 1375, St. Louis, Missouri,
9	Plaintiff's Exhibit No. 3	9	63101, before Kimberly A. Harris, a Certified
10	Plaintiff's Exhibit No. 4	10	Shorthand Reporter and Notary Public within and for
11	Plaintiff's Exhibit No. 5	11	the County of Madison, State of Illinois; that the
12	Plaintiff's Exhibit No. 6	12	issuance of notice and dedimus is waived, and that
13	AND AT	13	this deposition may be taken with the same force and
14		14	effect as If all statutory requirements had been
	INDEX OF CERTIFIED QUESTIONS	15	complied with,
15 40	PAGE LINE	16	IT IS FURTHER STIPULATED AND AGREED that any
16	1. Certify 115 10	17	and all objections to all or any part of this
17	2. Certify 119 22	18	deposition except objections as to the form of the
18	3. Certify 122 8	19	question are hereby reserved and may be raised on the
19	4, Cartify 123 6	20	trial of this cause; and that the signature of the
20		21	deponent is not waived.
21		22	
22		23	* * * * *
23			TIFE'S HEATHER JORDAN, M.D.,
24	2	EXH	IBIT: 4
	May Reporting Service		May Reporting Service

Γ.		A DESCRIPTION OF THE PROPERTY		South the form of the first transport
1		having been first duly sworn upon oath by	1	•
2	the court	reporter, testified as follows:	2	•
3		[EXAMINATION]	3	• •
4	QUESTION	NS BY MR. WENDLER:	4	•
5	Q.	I'll hand this back to you, Doctor.	5	, ,
6		Okay. Can you state your full name for	6	and there was just some questions about the extent of
7	us, please	<b>?</b>	7	
8	A.	Heather Renee Jordan.	8	Q. So you were testifying as a treating
9		MS. DREW: Dr. Khan, can you hear	9	physician?
10	okay?		10	A. Yes.
11		DR. KHAN: Yes, I can hear, but	11	Q. You've never been sued before; have you?
12	thank you	for asking.	12	A. I have.
13	Q.	(BY MR. WENDLER) Dr. Jordan, what, If	13	Q. How many times?
14	anything,	did you do to prepare for this deposition	14	A. Twice.
15	today?		15	Q. And you never testified in either of those
16	Α.	I reviewed the documents here briefly. I	16	cases?
17		the blood blood drawing SOP from Pharma	17	A, No.
18	Medica.	, <del></del>	18	
19	Q,	Is that in that pile that is there to your	19	
20	right?	, , , , , , , , , , , , , , , , , , ,	20	
21	A.	I believe so, sir.	21	
22	Q.	Okay.	22	,
23	A.	I know there's SOPs in here.	23	
24	Q.	Can you slide that pile over to me real	24	·
<b>2.</b> -7	O(i	5	- '	7
		May Reporting Service		May Reporting Service
1	quick?	may reporting service	1	
2	quicki	MR. WENDLER: For the record, the	2	
3	nlla mila k	s Bates numbered PMRI 00001 through	3	
4	005666,	s pages lightly of the coopy all order	4	
5	Q,	(BY MR. WENDLER) Is there anything else	5	
6	•	eviewed, Doctor, to prepare for this	6	•
	•		7	
7	deposition		8	
8	Α.	Other than just a phone call last week,	9	
9	that was		10	
10	Q.	All right. Phone call with the attorney?		
111	Α.	Yes.	11	
12	Q,	Okay. And how long did that phone call	12	·
13	last?	•• · · • · · · · · · · · · · · · · · ·	13	
14	Α.	About an hour,	14	• -
15	. Q.	Okay. And during that phone call, did you	15	
16	· ·	ything, or just verbal?	16	• •
17	Α.	Just verbal.	17	
18	Q.	Okay. Now, have you hired your own lawyer	18	•
19	for this ca		19	
20	Α.	No.	20	•
21	Q.	Okay. Have you ever testified in a	21	·
22	•	or a trial before?	22	•
23	Α.	Yes.	23	•
24	Q,	How many times, and what are the details?	24	
,		6		8
		May Reporting Service		May Reporting Service

1	Ian Wallace, or his contraction of Hepatitis C or his	1	fact, have Hepatitis C?
2	treatment in general. Any opinions at all that you	2	A. Yes.
3	have?	3	Q. Okay. Okay. You understand that you're
4	A. It's such a general question. I mean, we	4	not a defendant in this lawsuit; right?
5	had a wide variety of subjects. I remember Ian from	5	A. Yes.
6	our studies. I remember the the circumstances of	6	Q. What is your home address, ma'am?
7	his of his last study. I don't know that I have	7	A. 515 Possum Trot Road,
8	strong opinions about, you know, other than just	8	Q. Is that In Bug Tussle?
9	remembering what happened.	9	A. O'Fallon, Missouri.
10	Q. Okay.	10	MR. WENDLER: I think you got that
11	A. I know Pharma Medica's operational	11	one. But you're probably not old enough.
12	procedures.	12	Q. (BY MR. WENDLER) Do you know what Bug
13	Q, Okay,	13	Tussle Is?
14	A. I can't imagine how you would get	14	A. No, sir.
15	Hepatitis C at our facility. I don't know that I	15	Q. Did you ever watch the Beverly
16	have any other opinions.	16	Hillbilles?
17	Q. Okay. Is it your opinion Well, let me	17	A. A long time ago.
18	ask it this way: Do you have an opinion as to	18	Q. Okay. Your education and training, ma'am,
19	whether or not Mr. Wallace contracted Hepatitis C	19	let's switch subjects, and go to that. Where did you
20	through participation in any studies at Pharma	20	graduate from med school?
21	Medica? Do you have an opinion either way?	21	A. UMKG.
22	A. We used standard precautions. We use new,	22	Q. When?
23	fresh needles. I do not believe he contracted	23	A. 2000.
24	Hepatitis C at our facility.	24	Q. Where are you from originally?
	9	1	11
1	May Reporting Service		May Reporting Service
1	Q. Are you saying it's not possible that he	1	A. O'Fallon, Missouri.
2	contracted Hepatitis C through his participation in	2	Q. Where did you go to undergraduate?
3	the studies at Pharma Medica, or just not likely?	3	A. So, UMKC is a six year combined program
4	A. Well, that's why we have standard	4	where you do your undergraduate and your medical
5	precautions so that we all follow the same	5	school together in six years.
6	procedures. So that we wear gloves. You use a new	6	Q. Okay. Prior to working for Pharma Medica,
7	needles. New needles do not They've never been	7	have you ever worked in a pharmaceutical testing
8	used before. They're brand new. You don't get	8	facility?
9	Hepatitis C in that circumstance.	9	A. No.
10	Q. So, are you saying it's impossible for him	10	Q. And when dld you first start working for
11	to have contracted Hepatitis C at the Pharma Medica	11	Pharma Medica?
12	facility?	12	A. March of 2015.
13	A. I don't see how you can get Hepatitis C	13	Q. And when did you stop working there?
14	Q. Okay.	14	<ol> <li>My last day was towards the end of May</li> </ol>
15	A using clean needles.	15	this year.
16	Q. That doesn't quite answer my question.	16	Q. And why did you leave the employ of Pharma
17	Are you saying it's not possible that he contracted	17	Medica?
18	Hepatitis C at the Pharma Medica?	18	A. Pharma Medica closed their St. Louis
19	A. I don't think it's possible.	19	location.
20	Q. Okay. Do you have an opinion as to how it	20	Q. Okay. Did you leave on good terms?
21	was Mr. Wallace dld contract Hepatitis C?	21	A. Yes.
22	A. I don't know how he contracted Hepatitis	22	Q. Did you have a written contract when you
23	C.	23	worked for Pharma Medica?
24	Q. Are you of the opinion that he did, in	24	A. I had a letter of employment.
	10		12
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1	Q. And that laid out the terms of your	1	Medical Group in Kansas City, Missouri from 2009 to
2	employment?	2	2015.
3	A. Yes.	3	Q. And how did you find out about the Pharma
4	Q. Did that letter get revised every year, or	4	Medica position?
Б	was It the same letter?	Б	<ol> <li>A. It was a job ad that I replied to.</li> </ol>
6	A. It was the same one.	6	Q. Okay. And what prompted you to want to go
7	Q. Now, In terms of how you were paid by	7	to work for Pharma Medica?
8	Pharma Medica, was It a flat salary	8	A. Just the climate of medicine had changed,
9	A. Yes.	9	and I wanted to do something different.
10	Q or did you get bonuses? Did you get	10	Q. Okay. Was It an increase or a decrease in
11	Incentive pay?	11	pay for you?
12	A. It was a flat salary. One time we	12	A. That was part of it.
13	received a year-end bonus.	13	Q. What was part of It?
14	Q. And what was that bonus based on, as you	14	A. A decrease in pay.
15	understood It?	15	Q. It was a decrease for you to go to work
16	A. I don't I don't believe I was told what	16	for Pharma Medica?
17	the basis of the bonus was.	17	A. No. No, I'm sorry. A decrease in pay was
18	Q. Okay. Dld you ever ask why there were no	18	part of my looking for some other place to work.
19	other year-end bonuses, other than the one year?	19	Q. All right. So going to Pharma Medica
20	A. No.	20	Increased your pay?
21	Q. Did anyone ever tell you?	21	A. Yes.
22	A. No.	22	Q. Can you tell me, percentage-wise, how
23	Q. Did anyone ever tell you why you got the	23	much? Ball park's fine?
24	bonus for the one year?	24	A. I don't recall.
	13		15
<u></u>	May Reporting Service	ļ	May Reporting Service
1	A. No.	1	Q. Was that more than a 50-percent raise?
2	Q. Do you know if other people got bonuses	2	A. No.
3	that year, or was It just you?	3	Q. Okay.
4	A. No. Other people got bonuses, as well.	4	A. Maybe 10 percent, I I don't know
5	Q. Okay. Who determined what the bonuses	5	that's that a hundred percent accurate. I wouldn't
6	were, and who got them? Do you know?	6	want to
7	A. I do not.	7	Q. Okay. So, you read about the job, and you
8	Q. How did you find out about the bonus?	8	applied for it. And then what happened from there?
9	A. When it was presented to me in my office.	9	Did you have an interview, or what happened?
10	Q. And who presented it to you?	10	A. I had a phone interview with the VP of QA.
11	A. Mo Yamlahi, he was the VP of our site.	11 12	<ul><li>Q. And who is that?</li><li>A. At that time, it was Mary Stipancic.</li></ul>
12	Q. You have to spell that for me.		
13	A. It's We always called him Mo, M-O, and Yamlahi, Y-A-M-L-A-H-I.	13 14	Q. Can you spell that one for us?  A. I don't know if I can. I can give you my
14 15	•	16	best estimate, S-T-I-P-A-N-C-I-C.
16	Q. How did you find out about the Well, strike that,	16	Q. Okay. And after that, what happened?
17	You graduated from UMKC medical school in	17	A. After that, I had an in-person interview
18	2000; correct?	18	with the C.E.O.
19	A. Yes.	19	Q. Is that Dr. Khan?
20	Q, And you began working for Pharma Medica in	20	A. No.
21	2015. What did you do from 2000 to 2015?	21	Q. Who was is that?
22	A. I was in residency from 2000 to 2003. And	22	A, Latifa Yamlahi.
23	then I worked for Mercy Medical Group in Hazelwood	23	Q. Can you spell that one for us?
24	from 2003 to 2009. Then I worked for St. Luke's	24	A. L-A-T-I-F-A, and Y-A-M-L-A-H-I.
47	14	[ ]	16
	May Reporting Service		May Reporting Service
L	may roporally contro	1	med volumed on the

1	• -	1	Q. That's perfect. And then Study No. 2
2	on the spot, or did you have to walt, or what	2	would be 4109?
3	happened next?	3	A. Yes.
4	A. I was offered the position by Latifa that	4	Q. All right. We'll refer to that as Study
5	day.	5	No. 2. Is that okay?
6	Q. Okay. Let me ask you this, Dr. Jordan:	6	A. Okay.
7	You are familiar with the Hippocratic Oath; right?	7	Q. Okay. The sponsors of those studies, do
8	A. Yes,	8	you know who they were? Starting with Study No. 1?
9	Q. Tell me, in your own words, what is the	9	A. Study
10	Hippocratic Oath?	10	MS. DREW: And It's not a memory
11	<ol> <li>That the needs of the patient come first,</li> </ol>	11	game. So, you can
12	and that you don't do things to harm the patient.	12	Q. (BY MR. WENDLER) That's right. You can
13	That's it's what the patient needs is primary.	13	look at those records, if you need to.
14	Q. Okay. And you understand that your	14	A. Study No. 1 was Tris. I don't Let me
15	relationship with Mr. Wallace was not governed by the	15	check Study No. 2. I believe I know who study No. 2
16	Hippocratic Oath because you were not a treating	16	was. So, yes, I know who both the sponsors are.
17	physician; is that correct?	17	Q. Was Tris No. 1?
18	<ul> <li>A. I was not his treating physician.</li> </ul>	18	A. Yes.
19	Q. Okay.	19	Q. And No. 2 was Roxane?
20	<ul> <li>A. But as principal investigator, subject</li> </ul>	20	A. Yes.
21	safety is primary.	21	Q. How many studies, other than those two,
22	Q. Okay, So, you were governed by the	22	dld you supervise or oversee when you were working
23	Hippocratic Oath or not?	23	for Pharma Medica?
24	A. I see the Hippocratic Oath as a physician	24	A. I don't I couldn't give you an exact
	17		19
	May Reporting Service		May Reporting Service
1	general, not excluded in research.	1	number. We did studies on a regular basis.
2	Q. Okay. So, the answer to my question is:	2	Q. Just give me your best estimate? You can
3	You felt that you were obligated to adhere to the	3	give me a range, if that's easier for you.
4	Hippocratic Oath while you were in charge of the	4	A. I would guess I supervised at least a
5	studies at Pharma Medica?	5	hundred studies in the time that I was there.
6	A. Correct. Yes.	6	Q. Okay. Now, the studies that we're here
7	Q. All right.	7	about, Study No. 1 and Study No. 2, came with
8	A. Yes.	8	guidelines that the sponsors put out; correct?
9	<ul> <li>Q. Okay. The studies that we're here about,</li> </ul>	9	A. What do you mean by guidelines?
10	you know that there are two studies that are at issue	10	Q. Well
11	in this lawsuit; right?	11	(Whereupon, Plaintiff's
12	A. Yes.	12	Exhibit No. 1 was marked
13	Q. Is it okay if we refer to them as Study	13	for identification by the
14	No. 1 and Study No. 27	14	court reporter.)
15	A. So, I would know them by the study	15	Q. (BY MR. WENDLER) I'm going to show you
16	numbers. So	16	what we'll mark as Exhibit 1.
17	Q. Okay.	17	MS. DREW: Thank you.
18	A. So the first study, No. 1, do you mean	18	MR, WENDLER: You're welcome.
19	3952?	19	Q. (BY MR. WENDLER) And this was part of the
20	Q. That's exactly correct.	20	documents that you reviewed to prepare for the
21	A. Okay.	21	deposition today; correct?
22	Q. Would you prefer we refer to It as 3952?	22	A. Yes.
23	<ul> <li>A. Well, as long as we define that as Study</li> </ul>	23	Q. This was what was supplied to us from
24	No. 1, it can be study No. 1.	24	Pharma Medica's attorneys as the study guidelines.
	18		20
	May Reporting Service		May Reporting Service
			4.FF 00 H 0 20 4 0 0 7 F 2 F F D 1

1 And you see your signature on Page 2, Bates numbered 2 001697   3				· · · · · · · · · · · · · · · · · · ·
3 A. So, we would call this the study protocol. 4 C. The protocol? Thank you. So, cach of 5 those studies had a protocol that was provided by the 6 sponsor; correct? 7 A. The protocol was written, and approved by 8 the sponsor. 9 C. Okay, And If you turn to Page 2, that's 10 your signature; correct? 11 A. Yes. 12 C. And It says, "I am aware of the 13 Information in this protocol, and agree to comply 14 with all of the procodures contained therein." 15 Correct? 16 A. Yes. 17 Correct? 18 A. Yes. 18 A. That means that I will see that the study 19 Le conducted according to what is written in the 19 protocol. 2 Q. Okay. And the protocol governs terms such 2 a when blood is to be drawn; correct? 2 A. Yes. 3 A. The governs matters such as when the 2 participants are supposed to have meals; correct? 3 A. Yes. 4 C. Okay. Wal, the study guidelines govern 4 C. Does it govern procedures such as when the 4 participants are supposed to sleep, of core of the protocol would tell a subject to sleep. 4 C. Okay. Well, the study guidelines govern 5 A. Yes. 4 C. Okay. Wal, the study guidelines govern 5 A. Yes. 4 C. Okay. Wal, the study guidelines govern 6 C. Okay. Wal, the study guidelines govern 7 A. Thar's correct. 3 A. Yes. 4 C. Okay. Wal, the study guidelines govern 6 C. Okay. Wal, the study guidelines govern 7 A. Thar's correct. 4 C. Obes it govern procedures such as when the 4 participants are supposed to sleep, of does it vry 5 study to study? 5 A. Thar's correct. 6 C. Okay. Obes the study guidelines determine how 6 the blood is to be drawn in terms of using a needle, 7 C. Okay. Does the study guidelines determine how 7 C. Okay. Does the study guidelines determine when the 8 participants are to be re-tested, if necessari? 9 C. Okay. Does the study guidelines determine when the 19 participants are to be re-tested, if necessari? 10 C. Okay. Does the study guidelines determine when the 10 participants are to be re-tested, if necessari? 11		•	1	•
4 with the pretocol; sight? 5 those studies had a protocol that was provided by the sponsor; correct? 7 A. The protocol was written, and approved by the sponsor. 9 Q. Okay, And if you turn to Page 2, that's your signature; correct? 10 your signature; correct? 11 A. Yes. 12 A. Yes. 13 Correct. 14 A. Yes. 15 Correct. 16 A. Yes. 17 Q. Okay, Mand if you understand the to mean when you signed that? 18 A. Yes. 19 A. Yes. 10 Q. Kay, What did you understand the to mean when you signed that? 19 A. That means that I will see that the study is conducted according to what its written in the protocol as a when the protocol as a when the participants are supposed to have meals; correct? 2 A. Yes. 21 May Reporting Sorvice 21 A. Yes. 22 May Reporting Sorvice 23 A. Yes. 24 A. Yes. 25 May Reporting Sorvice 26 C. Okay, Will, the study guidelines of the regulation; a will all of the protocol would tell a subject to sleep. 26 Q. Okay, Will, the study guidelines of the reporting in an animal ones that I'm aware of. 27 A. That's correct. 28 A. That's correct. 29 Q. Okay, Will, the study guidelines determine when the blood is to be drawn and tested; is that correct? 3 A. That's correct. 4 Q. Does it govern procedures such as when the participants are supposed to sleep, or does it vary study to study? 4 A. That's correct. 4 Q. Does the study guidelines determine how the blood is to be drawn and tested; is that correct? 5 A. That's correct. 6 Q. Okay, Will, the study guidelines determine when the blood is to be drawn and tested; is that correct? 6 A. That's correct. 6 Q. Okay, Does the study — Strike that. 7 Q. Okay, On the study sponsors have the right to come in and montler the studies, if they want?  9 A. That's correct. 9 Q. Okay, Does the study — Strike that. 19 Q. Okay, Do the sponsors have the right to come in and montler the studies, if they want? 19 Q. Okay, Do the sponsors have the right to come in and montler the studies, if they want? 19 Q. Okay, Do the sponsors have the right to come in and montler the studies, if they want	1			•
5 those studies had a protocol that was provided by the 6 sponsor; curract? 7 A. The protocol was written, and approved by 7 b. The protocol was written, and approved by 8 the sponsor. 9 Q. Okay. And if you turn to Page 2, that's 10 your signature; correct? 11 A. Yes. 12 Q. And it says, "I am aware of the 13 information in this protocol, and agree to comply 14 with all of the procedures contained therein." 15 Correct. 16 A. Yes. 16 Correct. 17 Q. Okay. Mat did you understand that to 18 mean when you signed that? 19 Is conducted according to what is written in the 19 protocol. 20 Q. Okay. And the protocol governs terms such 18 as when blood is to be drawn; correct? 21 A. Yes. 22 Q. Okay. And the protocol governs terms such 23 as when blood is to be drawn; correct? 24 A. Yes. 25 May Reporting Service 26 A. Yes. 27 May So, basically the protocol 28 Q. Okay. It determines how the participants 29 A. A Yes. 20 Q. Okay. J. It determines how the participants 20 Q. Okay. Description in this protocol, and agree to comply 21 A. Yes. 22 Q. Okay. What did you understand that to 23 Make records are to be kept? 24 A. Yes. 25 Q. Okay. And the protocol governs terms such 26 as when blood is to be drawn; correct? 27 A. Yes. 28 A. Yes. 29 May Reporting Service 29 A. Yes. 20 Despit governs matters such as when the 20 participants are supposed to sleep, or does it vary 29 study to study? 20 A. Okay. And the protocol governs terms such 20 Q. Okay. Well, the add governs matters such as when the 21 participants are supposed to sleep, or does it vary 29 study to study? 20 A. There's not typically a specific time when 20 the participants are supposed to sleep, or does it vary 29 study to study? 20 A. There's not typically a specific time when 20 Cally, Well, the add governs matters of using a needle, 21 or using a catheter? 22 A. Those are the main ones that I'm aware of. 23 A. I beliave that's in the ICH, as well, as 24 far as duration of recordisceping guidelines 25 participants are supposed to sleep, or does it vary 26 study to study	Ι.	•		·
Section   Sect	1	•		
The protocol was written, and approved by 6 the aponacr.  Q. Ckay. And if you turn to Page 2, that's 9 A. Correct?  Q. Ckay. And if you turn to Page 2, that's 10 your signature; correct?  Q. Ckay. And if you turn to Page 2, that's 11 are to be selected, as well; right?  A. Yes.  Correct?  A. Yes.  Correct?  A. Yes.  Correct?  A. Yes.  That means that it will see that that to 18 mean when you signed that?  A. That means that I will see that the study is conducted according to what is written in the 21 protocol.  A. Yes.  A. Nas.  A. Yes.  A. Okay. And the protocol governs terms such as when the participants are supposed to sleep, or does it vary study to study?  A. There's not typically a spacific time when the participants are supposed to sleep, or does it vary study to study?  A. There's not typically a spacific time when the early in the protocol would tell a subject to sleep, or Q. Ckay. Will the study guidelines govern how the entire study is conducted, correct?  A. Yes.  21 are to be selected, as well; right?  A. Yes.  42 A. Yes.  43 C. And the pre-screenling tostling; right?  44 A. Yes.  45 Q. Okay. Do the study protocols determine when the participants.  46 Q. Okay. What did you understand that to 17 A. So, the records are kept according to the water cords are to be kept?  47 A. Such as the F.D.A., or the E.M.A.  48 Such as the F.D.A., or the E.M.A.  49 Q. Okay. And the protocol governs terms such as when the participants are supposed to have meals; correct?  A. Yes.  21 A. Yes.  22 A. International Conference of Hominization.  A. Yes.  A. There's not typically a spacific time when the participants are supposed to sleep, or does it vary study to study?  A. There's not typically a spacific time when the participants are supposed to sleep.  Q. Okay. Well the study guidelines govern the study subdelines that be study as the records are to be the regulatory aware of for these studies.  A. There's not typically a spacific time when the participants are supposed to sleep.  Q. Okay. Does the study - Strike that	1	•		
the sponsor.  Q. Okay. And if you turn to Page 2, that's your signature; correct? A. Yes. Information in this protocol, and agree to comply information in this protocol, and agree to comply if with all of the procedures contained therein." A. Yes. Correct? A. Yes. Correct? A. Yes. Correct and it says, "I am aware of the A. Yes. Correct and information in this protocol, and agree to comply if with all of the procedures contained therein." A. Yes. Correct and Co. And the pre-screening tosting; right? A. Yes. Correct and Co. And the pre-screening tosting; right? A. Yes. Correct and the procedures contained therein." A. Yes. Correct and the procedures contained therein." A. Yes. Co. Okay. What did you understand that to mean then you signed that? A. That means that I will see that the study is conducted according to what is written in the protocol. Co. Okay. And the protocol governs terms such as when blood is to be drawn; correct? A. Yes.  A. There's not typically a specific time when the participants are supposed to sleep, or does it vary study to study?  A. There's not typically a specific time when the protocol would tell a subject to sleep, or does it vary study to study?  A. There's not typically a specific time when the blood is to be drawn and tested; is that correct?  A. That's correct. A. Obas the study guidelines determine how the blood is to be drawn in terms of using a needle, or using a catheter?  A. Yes.  A. That's correct. A. Yes.  A. Okay. Do the study sponsors have the right to come in and conduct audits?  A. Yes.  A. Yes.  A. Yes.  A. Yes.  Come in and conduct audits?  A. Yes.  A. Yes.  A. Yes.  A. Yes.  A. Yes.  A. There's not typically a specific time when the blood is to be drawn in terms of using a needle, or using a catheter?  A. Yes.  Come in and conduct audits?  A. Yes.  A. Yes.  Come in and conduct audits?  A. Yes.  A. Yes.  A. Yes.  Come	ı	•		•
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10 your signature; correct? 11 A. Yes. 11 are to be selected, as well; right? 12 A. And it says, "I am aware of the 12 A. Yes. 13 information in this protocol, and agree to comply 13 Q. And the pre-screening testing; right? 14 with all of the procedures contained therein." 15 Q. Okay. Do the study protocols determine what records are to be kept? 16 A. Yes. 16 what records are to be kept? 17 Q. Okay. What did you understand that to 18 mean when you signed that? 18 means that I will see that the study 18 conducted according to what is written in the protocol. 18 June 19	1	•	1	·
11 A. Yes.  Q. And it says, "Tam aware of the 12 A. Yes.  13 Information in this protocol, and agree to comply with all of the procedures contained therein."  14 With all of the procedures contained therein."  15 Corroct?  16 A. Yes.  Q. Okay. What did you understand that to 18 mean when you signed that?  18 mean when you signed that?  A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 A. Yes.  20 A. That means that I will see that the study 19 A. Yes.  21 A. Yes.  22 A. Okay. And the protocol governs terms such 29 A. Yes.  23 A. Yes.  24 A. Yes.  25 A. Yes.  26 A. That means that I will see that the study 19 A. Yes.  27 A. That means that I will see that the study 19 A. Yes.  28 A. That source I would take the study 19 A. Yes.  29 A. Okay. And the protocol governs terms such 29 A. Well, the study guidelines of the regulatory authority.  29 A. That source I would take the study subtedines govern 29 A. Well, the study guidelines of the regulation of the regulatory authority.  29 A. That source I would take the study subtedines govern 29 A. Well, the study guidelines of the regulation of the regulatory authority.  29 A. That source I would take I was provided to recordkeeping that you're aware of?  30 A. Okay. And that the ICht, as well, as far as duration of recordkeeping that you're aware of?  31 A. There's not typically a specific time when the 20 participants are supposed to sheep, or does it vary 20 A. Well, the study guidelines govern 20 A. Well	1	•		
12   Q. And it says, "I am aware of the   13   Information in this protocol, and agree to comply   13   Q. And the pre-screening testing; right?   14   A. Yes.   15   Q. Okay. Do the study protocols determine   17   Q. Okay. What did you understand that to   17   Q. Okay. What did you understand that to   18   mean when you signed that?   18   A. That means that I will see that the study   18   D. Okay. And the protocol governs terms such   20   A. So, the records are kept according to the   18   guideline of the regulatory authority.   19   Q. Okay. And the protocol governs terms such   20   A. Su, the area is protocol.   21   Q. Okay. And the protocol governs terms such   22   A. Yes.   24   A. I the interval of the protocol governs matters such as when the   20 participants are supposed to sheep, or does it vary   21   Q. Okay. And it governs matters such as when the   20 participants are supposed to sleep, or does it vary   22   Study?   3   A. There's not typically a specific time when   30   Q. Okay. Well, the study guidelines govern   22   A. That's correct.   31   A. That's correct.   32   A. That's correct.   33   A. That's correct.   34   A. That's correct.   35   A. That's correct.   36   A. That's correct.   37   A. Yes.   38   A. Yes.   39   A. Yes.   39   A. Yes.   30   A. Y	1	•	1	•
13   Information in this protocol, and agree to comply   14   With all of the procedures contained therein."   14   A. Yes.   16   Correct?   16   A. Yes.   16   A. Yes.   16   A. Yes.   16   A. Yes.   17   A. So, the records are kept according to the mean when you signed that?   18   Eventually 20   Is conducted according to what is written in the protocol.   20   A. That means that I will see that the study 21   So conducted according to what is written in the protocol.   21   A. Yes.   22   A. Such as the F.D.A., or the E.M.A.   21   A. So, the records are kept according to the mean when you signed that?   18   Guideline of the regulatory authority.   19   A. Such as the F.D.A., or the E.M.A.   20   A. Such as the F.D.A., or the E.M.A.   21   A. Such as the F.D.A., or the E.M.A.   21   A. Such as the F.D.A., or the E.M.A.   22   A. Is believe that is in the ICH, as well, as far as duration of recordkeeping.   23   A. Is believe that is in the ICH, as well, as far as duration of recordkeeping.   23   A. Is believe that is in the ICH, as well, as far as duration of recordkeeping.   23   A. Is believe that is in the ICH, as well, as far as duration of recordkeeping.   23   A. Is believe that is in the ICH, as well, as far as duration of recordkeeping.   23   A. Is believe that is in the ICH, as well, as far as duration of recordkeeping.   23   A. Is believe that is in the ICH, as well, as far as duration of recordkeeping.   23   A. Is believe that is in the ICH, as well, as far as duration of recordkeeping.   23   A. International Conference of Hominization.   3   A. Yes.   4   A. O. A. No. A. Ves.   5   A. International Conference of Hominization.   4   A. Ves.   5   A. Theore are the main ones that I'm aware of.   7   A. There's not typically a specific time when the participants are supposed to sleep, or does it vary   3   A. That's correct.   4   A. Ves.   5   A. Ves.   6   A. Ves.   7   A. Ves.   7   A. Ve	1			
14 With all of the procedures contained therein." 15 Correct? 16 A. Ves. 16 What records are to be kept? 17 Q. Okay. What did you understand that to 18 mean when you signed that? 18 mean when you signed that? 19 A. That means that I will see that the study 19 A. That means that I will see that the study 19 is conducted according to what is written in the 21 protocol. 20 Q. Okay. And the protocol governs terms such 21 as when blood is to be drawn; correct? 21 A. Yes. 22 May Reporting Service 23 May Reporting Service 24 A. Ves. 25 May Reporting Service 26 Q. Okay. And the protocol governs matters such as when the 29 participants are supposed to have meals; correct? 27 A. There's not typically a specific time when 29 Q. Okay. What is study? 28 A. There's not typically a specific time when 29 Q. Okay. Well, the study guidelines govern 29 to testod; its that correct? 29 A. That's correct. 20 Q. Okay. Well, the study guidelines govern 29 to testod; its that correct? 20 A. That's correct. 21 A. Yes. 22 Q. Okay. Well, the study guidelines determine how 20 to the blood is to be drawn in terms of using a needle, 20 or using a catheter? 21 A. Yes. 22 Q. Okay. Dees the study — Strike that. 23 Do the study guidelines determine when the 20 participants are to be re-tested, if necessarify 20 Q. Okay. Dees the wild you delense determine when the 20 participants are to be re-tested, if necessarify 21 A. Re-tested for what? 23 A. The protocol isn't going to necessarify 22 Q. For anything? 24 A. Re-tested for what? 25 A. Re-tested for what? 26 A. There any whing the medication is to provision to re-test for anything. If there 22 Yes there any while ocameras a the Pharma Medica facility, Were you aware of those? 26 A. The protocol isn't going to necessarify 24 New a provision to re-test for anything. If there 22 Yes those video cameras operational?	ł	• •	i i	
15 Correct?  A. Yes.  Q. Okay. What did you understand that to 17 A. So, the records are kept according to the guideline of the regulatory authority.  A. That means that I will see that the study 18 conducted according to what is written in the 20 is conducted according to what is written in the 21 protocol.  Q. Okay. And the protocol governs terms such 22 as when blood is to be drawn; correct?  A. Yes.  21	1		L	·
16 A. Yes. C. Okay. What did you understand that to mean when you signed that? 18 mean when you signed that? 19 A. That means that I will see that the study 20 is conducted according to what is written in the 21 protocol. 22 Q. Okay. And the protocol governs terms such 23 as when blood is to be drawn; correct? 24 A. Yes. 25 May Reporting Service 26 Q. And it governs matters such as when the 27 participants are supposed to sleep, or does it vary 28 study to study? 29 Q. Okay. What that's the nolly guidelines that pertain 29 to revertifying ranging from when the medication is to be 20 Q. Okay. What that's in the ICH, as well, as 21 A. There's not typically a specific time when 29 the protocol would tell a subject to sleep. 30 Q. Okay. Whigh, the study guidelines govern 31 A. That's correct. 31 A. That's correct. 32 A. These are the main ones that I'm aware of. 33 Q. Okay. Any other guidelines that pertain 44 to recordkeeping that you're aware of for these 35 studies? 45 A. There's not typically a specific time when 46 the protocol would tell a subject to sleep. 46 Q. Okay. Well, the study guidelines govern 47 Q. Okay. Po the study sponsors have the 48 the protocol would tell a subject to sleep. 49 Q. Okay. Do the study sponsors have the right to have additional recordkeeping guidelines 40 quickled to the time the blood is to be drawn and 41 quickled to the time the blood is to be drawn and 42 tested; is that correct? 41 A. Yes. 42 Q. Okay. Do the sponsors have the right to come in and conduct audits? 43 A. I don't recall. 44 Q. Okay. Do the sponsors have the right to come in and conduct audits? 44 Q. Okay. Do the sponsors have the right to come in and conduct audits? 45 A. Yes. 46 Q. For anything? 47 A. Re-tested for what? 48 Q. Okay. Do the sponsors have the right to come in and conduct audits? 49 Q. How about the Well, let me ask you 40 this the blood is to be drawn in terms of using a needle, 40 or using a catheter? 41 A. Reserverde for what? 42 Q. Okay. Do the sponsors have the right to come in and conduct	1	·	1	
17 Q. Okay. What did you understand that to 18 mean when you signed that?  A. That means that I will see that the study 19 Q. Okay.  A. That means that I will see that the study 20 is conducted according to what is written in the 21 protocol.  Q. Okay. And the protocol governs terms such 21 Q. Okay. And that's the only guideline for recording that you're aware of?  A. Yes.  10 Q. And it governs matters such as when the 22 participants are supposed to have meals; correct?  A. Yes.  11 Q. Does It govern procedures such as when the 25 participants are supposed to sleep, or does it vary 26 study to study?  A. There's not typically a specific time when 27 the protocol would tall a subject to sleep.  Q. Okay. Well, the study guidelines govern 28 the protocol would tall a subject to sleep.  Q. Okay. Well, the study guidelines govern 29 Q. Okay. Well, the study guidelines determine how 20 to be drawn in terms of using a needle, 21 Q. Okay. Does the study guidelines determine how 21 to the blood is to be drawn in terms of using a needle, 21 Q. Okay. Does the study guidelines determine when the 22 Does the study guidelines determine when the 29 participants are to be re-tested, if necessary?  A. That was a provision to re-test for anything. If there 20 Date is provision to re-test for anything. There 20 Date is provision to re-test for anything. 15 there 20 Date is provision to re-test for anything. 15 the provision to re-test for anything. 16 Date is provision to re-test for anything. 17 the provision to re-test for anything. 17 the provision to re-test for anything. 18 Date is publication. 19 Date is provision to re-test for anythin				•
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19 A. That means that I will see that the study 20 Is conducted according to what is written in the 21 protocol. 22 Q. Okay. And the protocol governs terms such 23 as when blood is to be drawn; correct? 24 A. Yes. 25 May Reporting Service 26 Q. Okay And that's the only guideline for recordkeeping that you're aware of? 27 A. Yes. 28 May Reporting Service 29 participants are supposed to have meals; correct? 3 A. Yes. 4 Q. Does it governs matters such as when the 4 porticipants are supposed to sleep, or does it vary 5 study to study? 7 A. There's not typically a specific time when 8 the protocol would tall a subject to sleep. 9 Q. Okay. Well, the study guidelines govern 10 everything ranging from when the medication is to be 11 administered to the time the blood is to be drawn and 12 tested; is that correct? 13 A. That's correct. 14 Q. Does the study guidelines determine how 15 the blood is to be drawn in terms of using a needle, 16 or using a catheter? 17 A. Yes. 18 Q. Okay. Does the study - Strike that. 19 Does the study guidelines determine when the blood is to be drawn in terms of using a needle, 19 participants are to be re-tested, if necessary? 20 A. The protocol isn't going to necessarily 21 A. Re-tested for what? 22 Q. For anything? 23 A. The protocol isn't going to necessarily 24 have a provision to re-test for anything. If there 25 A. Such as the F.D.A., or the E.M.A. 26 Ckay. And that's the only guideline recordkeeping that you're aware of? 28 A. I believe that's in the ICH, as well, as far as duration of recordkeeping. 29 A. International Conference of Hominization. 3 A. Those are the main ones that I'm aware of. 4 C. Day, other guidelines that pertain to recordkeeping that you're aware of for these studies? 5 studies? 6 A. Those are the main ones that I'm aware of. 7 Q. Are there any minor ones? 8 A. Well, Health Canada in Canada. 9 Q. Okay. Do the study guidelines over and above what the other ones require? If you to main and conduct audits? 10 Come in and conduct audits? 11 Come in and conduct audit	1	·		•
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A. Yes.  A. Obes it govern procedures such as when the participants are supposed to sleep, or does it vary study to study?  A. There's not typically a specific time when the protocol would tell a subject to sleep.  A. Okay. Well, the study guidelines govern  C. Okay. Well, the study guidelines govern  everything ranging from when the medication is to be administered to the time the blood is to be drawn and tested; is that correct?  A. That's correct.  A. That's correct.  A. Obes the study guidelines determine how or using a catheter?  A. Yes.  A. Yes.  A. Yes.  A. Yes.  A. Re-tested for what?  A. The protocol isn't going to necessarily have a provision to re-test for anything. If there  A. Wes.	1	_	1	
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5 participants are supposed to sleep, or does it vary 6 study to study? 7 A. There's not typically a specific time when 8 the protocol would tell a subject to sleep. 9 Q. Okay. Well, the study guidelines govern 10 everything ranging from when the medication is to be 11 administered to the time the blood is to be drawn and 12 tested; is that correct? 13 A. That's correct. 14 Q. Does the study guidelines determine how 15 the blood is to be drawn in terms of using a needle, 16 or using a catheter? 17 A. Yes. 18 Q. Okay. Does the study Strike that. 19 Do the study guidelines determine when the 20 participants are to be re-tested, if necessary? 21 A. Re-tested for what? 22 Q. For anything? 23 A. The protocol isn't going to necessarily 24 have a provision to re-test for anything. If there 25 Interval Is audies? 26 A. Those are the main ones that I'm aware of.  A. Those are the main ones that I'm aware of.  A. Those are the main ones that I'm aware of.  A. Those are the main ones that I'm aware of.  A. Those are the main ones that I'm aware of.  A. Well, Health Canada in Canada.  9 Q. Okay. Do the study sponsors have the 10 right to have additional recordkeeping guidelines  11 over and above what the other ones require? If you 12 know? 13 A. I don't recall.  9 Q. Okay. Do the sponsors have the right to come in and conduct audits? 16 A. Yes.  17 Q. Do the sponsors have the right to come in and monitor the studies, if they want?  18 A. Yes.  9 Q. How about the Well, let me ask you 21 this: I was told that there were video cameras at the Pharma Medica facility. Were you aware of those? 22 A. The protocol isn't going to necessarily 23 A. The protocol isn't going to necessarily 24 have a provision to re-test for anything. If there	1.		4	
6 study to study? 7 A. There's not typically a specific time when 8 the protocol would tell a subject to sleep. 9 Q. Okay. Well, the study guidelines govern 10 everything ranging from when the medication is to be 11 administered to the time the blood is to be drawn and 12 tested; is that correct? 13 A. That's correct. 14 Q. Does the study guidelines determine how 15 the blood is to be drawn in terms of using a needle, 16 or using a catheter? 17 A. Yes. 18 Q. Okay. Does the study Strike that. 19 Do the study guidelines determine when the 10 participants are to be re-tested, if necessary? 14 A. Re-tested for what? 15 I was told that there were video cameras at 16 the Pharma Medica facility. Were you aware of those? 17 A. Yes. 18 Q. For anything? 19 Q. Are there any minor ones? 18 A. Well, Health Canada in Canada. 19 Q. Okay. Do the study sponsors have the 10 right to have additional recordkeeping guidelines 11 over and above what the other ones require? If you 12 know? 13 A. I don't recall. 14 Q. Okay. Do the sponsors have the right to 15 come in and conduct audits? 16 A. Yes. 17 Q. Do the sponsors have the right to come in 18 and monitor the studies, if they want? 19 A. Yes. 20 Q. How about the Well, let me ask you 21 A. Re-tested for what? 22 Q. For anything? 23 A. Yes. 24 Q. Were those video cameras operational?	l _	··· · · · · · · · · · · · · · · · · ·	5	
7 A. There's not typically a specific time when 8 the protocol would tell a subject to sleep. 9 Q. Okay. Well, the study guldelines govern 10 everything ranging from when the medication is to be administered to the time the blood is to be drawn and tested; is that correct? 13 A. That's correct. 14 Q. Does the study guidelines determine how to be drawn in terms of using a needle, or using a catheter? 15 A. Yes. 16 Q. Okay. Does the study Strike that. 17 Do the study guidelines determine when the porticipants are to be re-tested, if necessary? 18 A. Re-tested for what? 19 Participants are to be re-tested, if necessarily and provision to re-test for anything. If there 20 Were those video cameras operational? 17 Q. Are there any minor ones? 18 A. Well, Health Canada in Canada. 19 Q. Okay. Do the study sponsors have the right to have additional recordkeeping guidelines over and above what the other ones require? If you over and above what the other ones require? If you have additional recordkeeping guidelines over and above what the other ones require? If you over and above what the other ones require? If you have additional recordkeeping guidelines over and above what the other ones require? If you have additional recordkeeping guidelines over and above what the other ones require? If you over and above what the other ones require? If you have and above what the other ones require? If you over and above what the other ones require? If you have a diditional recordkeeping guidelines over and above what the other ones require? If you over and above what the other ones require? If you have additional recordkeeping guidelines over and above what the other ones require? If you over and above what the other ones require? If you over and above what the other ones require? If you over and above what the other ones require? If you over and above what the other ones require? If you over and above what the other ones require? If you over and above what the other ones require?  In Q. Okay. Do the sponsors have the right to o	1		6	
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12 tested; is that correct?  13 A. That's correct.  14 Q. Does the study guidelines determine how 15 the blood is to be drawn in terms of using a needle, 16 or using a catheter? 17 A. Yes. 18 Q. Okay. Does the study Strike that. 19 Do the study guidelines determine when the 20 participants are to be re-tested, if necessary? 21 A. Re-tested for what? 22 Q. For anything? 23 A. The protocol isn't going to necessarily 24 have a provision to re-test for anything. If there 22 Q. Were those video cameras operational? 24 Menus doubt the recall. 26 A. I don't recall. 27 A. I don't recall. 28 A. I don't recall. 29 Q. Okay. Do the sponsors have the right to come in and monitor the studies, if they want? 29 A. Yes. 20 Q. How about the Well, let me ask you this: I was told that there were video cameras at the Pharma Medica facility. Were you aware of those? 29 A. Yes. 20 Q. Were those video cameras operational? 20 Q. Were those video cameras operational?	10	everything ranging from when the medication is to be	10	right to have additional recordkeeping guidelines
A. That's correct.  13 A. I don't recall.  14 Q. Does the study guidelines determine how  15 the blood is to be drawn in terms of using a needle,  16 or using a catheter?  17 A. Yes.  18 Q. Okay. Does the study Strike that.  19 Do the study guidelines determine when the  20 participants are to be re-tested, if necessary?  21 A. Re-tested for what?  22 Q. For anything?  23 A. The protocol isn't going to necessarily  24 have a provision to re-test for anything. If there  26 Do the sponsors have the right to come in  27 a. Yes.  28 Q. How about the Well, let me ask you  29 this: I was told that there were video cameras at  29 the Pharma Medica facility. Were you aware of those?  20 Q. Were those video cameras operational?  21 Q. Were those video cameras operational?	11	administered to the time the blood is to be drawn and	11	over and above what the other ones require? If you
14 Q. Does the study guidelines determine how 15 the blood is to be drawn in terms of using a needle, 16 or using a catheter? 17 A. Yes. 18 Q. Okay. Does the study Strike that. 19 Do the study guidelines determine when the 20 participants are to be re-tested, if necessary? 21 A. Re-tested for what? 22 Q. For anything? 23 A. The protocol isn't going to necessarily 24 have a provision to re-test for anything. If there 26 Do the sponsors have the right to come in and conduct audits? 27 Q. Do the sponsors have the right to come in and monitor the studies, if they want? 28 Q. How about the Well, let me ask you this: I was told that there were video cameras at the Pharma Medica facility. Were you aware of those? 28 A. Yes. 29 Q. Were those video cameras operational? 29 Q. Were those video cameras operational?	12	tested; is that correct?	12	know?
the blood is to be drawn in terms of using a needle, or using a catheter?  A. Yes.  Q. Okay. Does the study Strike that. Do the study guidelines determine when the participants are to be re-tested, if necessary? A. Re-tested for what? Q. For anything? A. The protocol isn't going to necessarily have a provision to re-test for anything. If there  15 come in and conduct audits? A. Yes.  16 A. Yes.  17 Q. Do the sponsors have the right to come in and monitor the studies, if they want?  18 A. Yes.  20 Q. How about the Well, let me ask you 21 this: I was told that there were video cameras at 22 the Pharma Medica facility. Were you aware of those? 23 A. Yes.  24 Q. Were those video cameras operational? 25 Q. Were those video cameras operational?	13	A. That's correct.	13	A. I don't recall.
16 or using a catheter?  17 A. Yes.  18 Q. Okay. Does the study Strike that.  19 Do the study guidelines determine when the  20 participants are to be re-tested, if necessary?  21 A. Re-tested for what?  22 Q. For anything?  23 A. The protocol isn't going to necessarily  24 have a provision to re-test for anything. If there  26 A. Yes.  27 Q. Do the sponsors have the right to come in  28 and monitor the studies, if they want?  29 Q. How about the Well, let me ask you  20 this: I was told that there were video cameras at  21 the Pharma Medica facility. Were you aware of those?  22 A. Yes.  23 A. Yes.  24 Q. Were those video cameras operational?	14	Q. Does the study guidelines determine how	14	Q. Okay. Do the sponsors have the right to
17 Q. Do the sponsors have the right to come in 18 Q. Okay. Does the study Strike that. 19 Do the study guidelines determine when the 20 participants are to be re-tested, if necessary? 21 A. Re-tested for what? 22 Q. For anything? 23 A. The protocol isn't going to necessarily 24 have a provision to re-test for anything. If there 29 Q. Do the sponsors have the right to come in 18 and monitor the studies, if they want? 19 A. Yes. 20 Q. How about the Well, let me ask you 21 this: I was told that there were video cameras at 22 the Pharma Medica facility. Were you aware of those? 23 A. Yes. 24 Q. Were those video cameras operational? 26 Q. Were those video cameras operational?	15	the blood is to be drawn in terms of using a needle,	15	come in and conduct audits?
18 Q. Okay. Does the study Strike that. 19 Do the study guidelines determine when the 20 participants are to be re-tested, if necessary? 21 A. Re-tested for what? 22 Q. For anything? 23 A. The protocol isn't going to necessarily 24 have a provision to re-test for anything. If there 29 A. Okay. Does the study Strike that. 29 A. Yes. 20 Q. How about the Well, let me ask you 21 this: I was told that there were video cameras at 22 the Pharma Medica facility. Were you aware of those? 23 A. Yes. 24 Q. Were those video cameras operational? 25 Q. Were those video cameras operational?	16	or using a catheter?	16	A. Yes.
Do the study guidelines determine when the participants are to be re-tested, if necessary?  A. Re-tested for what?  Q. For anything?  A. The protocol isn't going to necessarily  have a provision to re-test for anything. If there  20 Q. How about the Well, let me ask you  21 this: I was told that there were video cameras at  22 the Pharma Medica facility. Were you aware of those?  A. Yes.  23 A. Yes.  24 Q. Were those video cameras operational?  26 Q. Were those video cameras operational?	17	A, Yes.	17	Q. Do the sponsors have the right to come in
participants are to be re-tested, if necessary?  A. Re-tested for what?  Q. For anything?  A. The protocol isn't going to necessarily  have a provision to re-test for anything. If there  20 Q. How about the Well, let me ask you  21 this: I was told that there were video cameras at  22 the Pharma Medica facility. Were you aware of those?  A. Yes.  24 Q. Were those video cameras operational?	18	Q. Okay. Does the study Strike that.	18	and monitor the studies, if they want?
A. Re-tested for what?  Q. For anything?  A. The protocol isn't going to necessarily  A. Yes.  A. Yes.  Q. Were those video cameras operational?	19	Do the study guidelines determine when the	19	A. Yes.
22 Q. For anything? 23 A. The protocol isn't going to necessarily 24 have a provision to re-test for anything. If there 22 the Pharma Medica facility. Were you aware of those? 23 A. Yes. 24 Q. Were those video cameras operational? 25 26 27 28	20	participants are to be re-tested, if necessary?	20	·
23 A. The protocol isn't going to necessarily 24 have a provision to re-test for anything. If there 22 Q. Were those video cameras operational? 24 24	21	A. Re-tested for what?	21	this: I was told that there were video cameras at
24 have a provision to re-test for anything. If there 24 Q. Were those video cameras operational? 22 24	22	Q. For anything?	22	the Pharma Medica facility. Were you aware of those?
22 24	23		i	
····	24	have a provision to re-test for anything. If there	24	Q. Were those video cameras operational?
May Reporting Service May Reporting Service				
	<u></u>	May Reporting Service	<u></u>	May Reporting Service

1	A, Yes.	1	done through the IT department. I know that Mo and
2	Q. Do you know if the sponsors have the right	2	Louis had access, as well as Shabaz. Besides that, I
3	to observe the studies through the video feeds,	3	don't know if anyone else had access.
4	through the video cameras at Pharma Medica?	4	Q. Shabaz is Dr. Khan?
Б	A. That I do not know,	5	A. Yes.
6	Q. Okay. Do you know If any of the sponsors	6	Q. And Mo is Yamlahi?
7	I'm sorry.	7	A. Yes,
8	A. So, I'm trying to recall. I don't That	8	Q. And Louis is? What's his last name?
9	was I don't believe that that was something that	9	A. Louis Co.
10	was ever done, to my recollection.	10	Q. Co? Is Louis Co a doctor?
11	Q. Okay. That was my next question: Do you	11	A. No.
12	know if that occurred? And you just don't know?	12	Q. Is Mo Yamlahi a doctor?
13	A. I don't know.	13	A. No.
14	Q. All right. Well, let's talk about those	14	Q. How about Dr. Shabaz Khan, Is he a doctor?
15	video cameras. You said they were operational. What	16	A, Yes.
16	were they there for, to your knowledge?	16	Q. Do you know If he's licensed in the U.S.
17	A. They were there They were pointed in	17	anywhere?
18	different places. So, like at the parking lots to	18	A. No.
19	make sure that the site was safe. They did have them	19	Q. He's not?
20	in dosing rooms to make sure that dosing was	20	A. He's not.
21	appropriate, if there were any concerns about the	21	Q. Okay. Is he licensed in Canada?
22	dosing procedures.	22	A. I don't know.
23	Q. Okay.	23	Q. Okay. For housekeeping purposes, I'm
24	A. Beyond that, I know that there were some	24	going to hand you what we will mark as Exhibit 2.
	Afair Banadhar Canda		May Reporting Service
-	May Reporting Service directed at like where the staff would sign in to	1	(Whereupon, Plaintiff's
1	make sure that sign-in was appropriate.	2	Exhibit No. 2 was marked
3	Q. How about the blood draw area?	3	for Identification by the
4	A. I don't know that I could say they were	4	court reporter.)
5	specifically aimed at the blood draw area.	5	MS. DREW: Thank you.
6	Q. Do you know if the video cameras recorded	6	Q. (BY MR. WENDLER) And that is the cover
7	what was going on, or was it just a video feed so	7	page and signature sheet for the second study that
8	that someone could monitor?	8	we're about today. Do you see that?
9	A. My understanding is that it was a video	9	A. Yes.
10	feed. And if nothing was done, it was re-recorded	10	Q. And do you recognize on Page 2 your
11	over	11	signature?
12	Q. If nothing was done? In other	12	A. Yes.
13	words somebody would have to affirmatively	13	Q. Okay. Each of these protocols, Dr.
14	A. So, if that wasn't saved, it was	14	Jordan, had a requirement that there be insurance.
15	re-recorded over.	15	Were you aware of that?
16	Q. Do you know what the duration was before	16	A. Yes.
17	it was recorded over?	17	Q. Do you know why there was no insurance for
18	A. I do not.	18	this claim? At least it's been reported there was no
19	Q. And do you know who determined whether the	19	Insurance for this claim. Do you know why?
20	video was saved or not?	20	A. I do not know why.
21	A. I don't know.	21	. Q. Do you know if there was insurance for
22	Q. Do you know who was on the other end of	22	either of these studies?
23	the camera watching, if anyone?	23	A. Typically, that would be something done at
24	A. You had to have certain access that was	24	the business level between the business part and the
	28		28
	May Reporting Service		May Reporting Service

1	sponsor who would take care of the insurance.	1	will have flability insurance?
2	Q. And who was at the business level?	2	A. To my understanding, that it was written
3	<ol> <li>So, that would be like the project</li> </ol>	3	in the protocol. It's my understanding that PMRI
4	management group.	4	does have liability insurance.
5	Q. Okay. Who was that? Give me some names,	5	Q. Okay, But the question was: To the
6	please?	6	extent there is no liability insurance to cover this
7	A. That would be out of the head office in	7	claim, is it your testimony that that was not your
8	Canada. The head of the of the project manager	8	job to arrange for that?
9	group I can see her face. Marianna Colalillo.	9	A. That would not typically be within my job
10	Q. Can you spell that one?	10	description to arrange for liability insurance for
11	A. I believe it's C-O-L-L-A-I-L-O. I	11	the studies.
12	believe.	12	Q. Okay. And did you do anything to,
13	Q. And you said that at the business office	13	compliance with the protocol, determine whether or
14	in Canada. So, that's where doctor Khan's office is?	14	not there was Insurance?
15	<ol> <li>He works out of the clinic in Canada,</li> </ol>	15	A. No.
16	which is a separate location.	16	Q. Okay. I should've explained this to you
17	Q. Have you ever been to any of the Canadian	17	earlier. But if at any point in time I ask a
18	offices of Pharma Medica?	18	question that's not completely clear to you, let my
19	A, One time.	19	know, and I'll be glad to rephrase it for you.
20	Q. Which one did you to go?	20	A. Okay.
21	A. I was I visited both locations.	21	Q. So far you're doing fine.
22	Q. Okay. Back to the insurance issue. To	22	Let me ask you this about the studies that
23	the extent there was supposed to be insurance, but	23	Mr. Wallace participated in. Do you agree that
24	there was not, is it your testimony that was not your	24	Mr. Wallace did not have Hepatitis C when he first
	29		31
	May Reporting Service	1	May Reporting Service
1	responsibility?	1	screened for the Study No. 1?
2	responsibility?  A. I'd have to look in the protocol. Which	2	A. He had a negative Hepatitis C antibody
2	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?	3	A. He had a negative Hepatitis C antibody blood test.
2 3 4	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific	2 3 4	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have
2	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?	2 3 4 5	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?
2 3 4 5 6	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.	2 3 4 5 6	A. He had a negative Hepatitis C antibody blood test. Q. And does that mean he did not have Hepatitis C? A. There was no evidence of Hepatitis C at
2 3 4 5 6 7	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I	2 3 4 5 6 7	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?  A. There was no evidence of Hepatitis C at that time.
2 3 4 5 6 7 8	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Elther one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.	2 3 4 5 6 7 8	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?  A. There was no evidence of Hepatitis C at that time.  Q. Okay. How about Study No. 2, when
2 3 4 5 6 7 8 9	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.  A. I don't know who it is, no.	2 3 4 5 6 7 8 9	A. He had a negative Hepatitis C antibody blood test. Q. And does that mean he did not have Hepatitis C? A. There was no evidence of Hepatitis C at that time. Q. Okay. How about Study No. 2, when Mr. Wallace first screened for Study No. 2, that is
2 3 4 5 6 7 8 9	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.  A. I don't know who it is, no.  Q. Look at Bates No. 389, or 221.	2 3 4 5 6 7 8 9	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?  A. There was no evidence of Hepatitis C at that time.  Q. Okay. How about Study No. 2, when Mr. Wallace first screened for Study No. 2, that is Study No. 4109, do you agree he did not have
2 3 4 5 6 7 8 9 10	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.  A. I don't know who it is, no.  Q. Look at Bates No. 389, or 221.  A. So, this says under the insurance, "For	2 3 4 5 6 7 8 9 10	A. He had a negative Hepatitis C antibody blood test. Q. And does that mean he did not have Hepatitis C? A. There was no evidence of Hepatitis C at that time. Q. Okay. How about Study No. 2, when Mr. Wallace first screened for Study No. 2, that is Study No. 4109, do you agree he did not have Hepatitis C at that time?
2 3 4 5 6 7 8 9 10 11 12	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.  A. I don't know who it is, no.  Q. Look at Bates No. 389, or 221.  A. So, this says under the insurance, "For the purpose of study-related injuries, the sponsor	2 3 4 5 6 7 8 9 10 11	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?  A. There was no evidence of Hepatitis C at that time.  Q. Okay. How about Study No. 2, when Mr. Wallace first screened for Study No. 2, that is Study No. 4109, do you agree he did not have Hepatitis C at that time?  A. He had a negative antibody test for
2 3 4 5 6 7 8 9 10 11 12 13	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.  A. I don't know who it is, no.  Q. Look at Bates No. 389, or 221.  A. So, this says under the insurance, "For the purpose of study-related injuries, the sponsor will have valid insurance for the duration of the	2 3 4 5 6 7 8 9 10 11 12 13	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?  A. There was no evidence of Hepatitis C at that time.  Q. Okay. How about Study No. 2, when Mr. Wallace first screened for Study No. 2, that is Study No. 4109, do you agree he did not have Hepatitis C at that time?  A. He had a negative antibody test for Hepatitis C.
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2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.  A. I don't know who it is, no.  Q. Look at Bates No. 389, or 221.  A. So, this says under the insurance, "For the purpose of study-related injuries, the sponsor will have valid insurance for the duration of the study." So, that part would be through the sponsor.  And  Q. The next study?  A. The next study is Roxane. The next sentence, "PMR will have valid liability insurance at all times."	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?  A. There was no evidence of Hepatitis C at that time.  Q. Okay. How about Study No. 2, when Mr. Wallace first screened for Study No. 2, that is Study No. 4109, do you agree he did not have Hepatitis C at that time?  A. He had a negative antibody test for Hepatitis C.  Q. So again, he did not have Hepatitis at that point; right?  A. He had no evidence of Hepatitis at that time.  Q. When you say he had no evidence of Hepatitis, does that mean he did not have Hepatitis,
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.  A. I don't know who it is, no.  Q. Look at Bates No. 389, or 221.  A. So, this says under the insurance, "For the purpose of study-related injuries, the sponsor will have valid insurance for the duration of the study." So, that part would be through the sponsor.  And  Q. The next study?  A. The next study is Roxane. The next sentence, "PMR will have valid liability insurance at all times."  Q. PMRI is?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?  A. There was no evidence of Hepatitis C at that time.  Q. Okay. How about Study No. 2, when Mr. Wallace first screened for Study No. 2, that is Study No. 4109, do you agree he did not have Hepatitis C at that time?  A. He had a negative antibody test for Hepatitis C.  Q. So again, he did not have Hepatitis at that point; right?  A. He had no evidence of Hepatitis at that time.  Q. When you say he had no evidence of Hepatitis, does that mean he did not have Hepatitis, or it is possible that he had it, and it just didn't
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.  A. I don't know who it is, no.  Q. Look at Bates No. 389, or 221.  A. So, this says under the insurance, "For the purpose of study-related injuries, the sponsor will have valid insurance for the duration of the study." So, that part would be through the sponsor.  And  Q. The next study?  A. The next study is Roxane. The next sentence, "PMR will have valid liability insurance at all times."  Q. PMRI is?  A. Pharma Medica Research.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?  A. There was no evidence of Hepatitis C at that time.  Q. Okay. How about Study No. 2, when Mr. Wallace first screened for Study No. 2, that is Study No. 4109, do you agree he did not have Hepatitis C at that time?  A. He had a negative antibody test for Hepatitis C.  Q. So again, he did not have Hepatitis at that point; right?  A. He had no evidence of Hepatitis at that time.  Q. When you say he had no evidence of Hepatitis, does that mean he did not have Hepatitis, or it is possible that he had it, and it just didn't read?
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.  A. I don't know who it is, no.  Q. Look at Bates No. 389, or 221.  A. So, this says under the insurance, "For the purpose of study-related injuries, the sponsor will have valid insurance for the duration of the study." So, that part would be through the sponsor.  And  Q. The next study?  A. The next study is Roxane. The next sentence, "PMR will have valid liability insurance at all times."  Q. PMRI is?  A. Pharma Medica Research.  Q. Pharma Medica Research?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?  A. There was no evidence of Hepatitis C at that time.  Q. Okay. How about Study No. 2, when Mr. Wallace first screened for Study No. 2, that is Study No. 4109, do you agree he did not have Hepatitis C at that time?  A. He had a negative antibody test for Hepatitis C.  Q. So again, he did not have Hepatitis at that point; right?  A. He had no evidence of Hepatitis at that time.  Q. When you say he had no evidence of Hepatitis, does that mean he did not have Hepatitis, or it is possible that he had it, and it just didn't read?  A. There are circumstances where you have an
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2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	responsibility?  A. I'd have to look in the protocol. Which one are you speaking about?  Q. Either one. I can point you to a specific page, if that'll help?  A. It would.  Q. If you need to take that phone call, I don't care.  A. I don't know who it is, no.  Q. Look at Bates No. 389, or 221.  A. So, this says under the insurance, "For the purpose of study-related injuries, the sponsor will have valid insurance for the duration of the study." So, that part would be through the sponsor.  And  Q. The next study?  A. The next study is Roxane. The next sentence, "PMR will have valid liability insurance at all times."  Q. PMRI is?  A. Pharma Medica Research.  Q. Pharma Medica Research?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	A. He had a negative Hepatitis C antibody blood test.  Q. And does that mean he did not have Hepatitis C?  A. There was no evidence of Hepatitis C at that time.  Q. Okay. How about Study No. 2, when Mr. Wallace first screened for Study No. 2, that is Study No. 4109, do you agree he did not have Hepatitis C at that time?  A. He had a negative antibody test for Hepatitis C.  Q. So again, he did not have Hepatitis at that point; right?  A. He had no evidence of Hepatitis at that time.  Q. When you say he had no evidence of Hepatitis, does that mean he did not have Hepatitis, or it is possible that he had it, and it just didn't read?  A. There are circumstances where you have an

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May Reporting Service

	1	T 4	A. Voo
1	test is negative.	1	A. Yes.
2	Q. Okay. And tell me, what are those circumstances where that could occur?	3	Q antibody; correct? A. Yes.
3 4	A. If you have an earlier exposure, I have	4	Q. And you do agree that Mr. Wallace did have
5	Hepatitis C in my blood, and I haven't had enough	5	Hepatitis C on June 26th, 2016 when he was at
6	time to develop an antibody response.	6	Anderson Hospital?
7	Q. Okay. And how much time does it take?	7	A. Yes.
8	A. That is variable.	8	Q. Yes? Okay, We kind of hit on this
9	Q. Variable from what to what?	9	earlier, but the studies that Mr. Wallace
10	A. From the amount of the exposure to the	10	participated in, they used, at Pharma Medica, needles
11	person, and a person's immune system.	111	rather than catheters to draw blood; correct?
12	Q. What's the shortest and the longest time	12	A. Correct.
13	frames?	13	Q. Do you know that other study groups use
14	A. From my understanding, it could be two to	14	catheters rather than needles? Were you aware of
15	six months.	15	that?
16	Q. Two to six months? And where did you	16	A. We In Pharma Medica in Canada, they use
17	acquire that understanding?	17	catheters.
18	A. To me, I believe that's general knowledge	18	Q. Okay.
19	about Hepatitis C.	19	A. We've had a few studies that have used
20	Q. Okay. Did you Can you cite me to any	20	catheters here, but they were IV catheters, and it
21	studies, or any reports, or any medical journals that	21	was specific to that study. I don't It was
22	support that?	22	neither one of these studies.
23	A. I don't know that I could give you a	23	Q. Neither one of the two studies that we're
24	specific example. The one that I most commonly use	24	here about today; correct?
	33		35
	May Reporting Service		May Reporting Service
1	would be UpToDate. It's a computer program called	1	A. Correct.
2	UpToDate.	2	Q. All right. What determines Strike
3	Q. And do you use that in your general	3	that,
4	practice as a	4	At Pharma Medica, what determined whether
5	A. Uh-huh.	5	you used needles or catheters? Was It In the
6	Q physician? And that's yes?	6	sponsor's protocol?
7	A. Yes.	7	A. The times in Pharma Medica where we've
8	Q. You find that authoritative?	8	used catheters, it was based on the regulatory
9	A. I'm sorry.	9	guidance of the study. And that was Anvisa studies
10	Q. Do you find that authoritative, the	10	require that subjects be given the option of a
11	UpToDate program?	11	catheter.
12	<ol> <li>I do think it's a good reference source.</li> </ol>	12	Q. Okay. Was that more expensive to use the
13	Q. Okay. Have you ever done any research	13	catheters rather than the needles?
14	specifically to determine what the period is that you	14	A. I don't know.
15	can have the Hepatitis C virus, and still have a	15	Q. Okay, Was Mr. Wallace given the option of
16	negative antibody?	16	catheter or needles?
17	A. I have not personally done specify	17	A. Not in these studies.
18	research on that.	18	Q. Okay. So, pardon me. I dldn't understand
19	Q. Okay. Do you consider yourself an expert	19	you, But what determines whether a catheter or a
20	In Hepatitis C?	20	needle is used during the Pharma Medica studies that
21	A. No.	21	you were In?
22	Q. All right. So, we're in agreement that	22	A, At our St. Louis site, our standard was
23	Mr. Wallace tested negative before Study No. 1, and	23	direct vena puncture, or a needle. We did a few
24	before Study No. 2 for the Hepatitis C	24	what's Anvisa studies. Anvisa is like the Brazilian
	34		36
<u> </u>	May Reporting Service	<u></u>	May Reporting Service

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		1.	
1	F.D.A.	1	not allow a subject to leave our building with a
2	Q. Anvisa?	2	catheter
3	A. A-N-V-I-S-A.	3	Q. Of course.
4	Q. Is that one word?	4	A. ··· In place.
5	A. Yes.	5	Q. But most of the studies, the participants
6	Q. Okay.	6	stay in while the blood draws are occurring; correct?
7	A. I believe it's an acronym. I don't know	7	A. They would be in for a period of time.
8	what it stands for.	8	And then some studies have return blood draws on an
9	Q. And these are Brazilian studies?	9	outpatient visit, depending on the sequence of blood
10	A. Yes.	10	draws
11	Q. Okay. And they required the use of	11	Q. Okay.
12	catheters in the Brazilian studies?	12	A and their timing.
13	A. I believe the wording is that they	13	Q. When the catheters were used at the Pharma
14	required catheters be offered. So, a volunteer could	14	Medica facility in the other studies, not the studies
15	decline a catheter, and still have a direct stick.	15	that we're here about today, did that require any
16	Q. Okay. In those studies, did most of the	16	additional licensure or training for employees?
17	participants opt for the catheters?	17	A. Catheter studies, you have to have been
18	A. I don't know that I could tell you the	18	trained to place a catheter.
19	number. I don't I wouldn't want to tell you	19	Q. Okay.
20	something that's not true.	20	<ol> <li>So that would be paramedics and nurses.</li> </ol>
21	Q. What's the difference between using the	21	Q. All right. And for the needle stick, who
22	needles and the catheters, other than the needle you	22	can do that?
23	have to be stuck every time blood is drawn?	23	<ul> <li>That would be someone who has been trained</li> </ul>
24	<ol> <li>The catheter, it just stays there.</li> </ol>	24	as a phlebotomist.
	37	1	39
	May Reporting Service	<u> </u>	May Reporting Service
1	Q. Okay.	1	<ul> <li>Q. Do you know what the difference, if any,</li> </ul>
2	A. So, it's If I'm doing other things, if	2	there is in the pay for the paramedics and nurses
3	I'm on my computer, it might be irritating to my arm.	3	versus the phlebotomists?
4	Q. Okay. But you only get stuck once with a	4	A. I do not.
5	catheter; correct?	5	Q. Do you do any of the hiring or firing of
6	<ul> <li>A. Not necessarily. So, if they were able to</li> </ul>	6	the Pharma Medica employees at the St. Charles
7	place the catheter on the first stick, then that	7	facility?
8	would be true.	8	A. I hired and fired the sub investigators.
9	Q. Yes.	9	Q. The sub?
10	A. Sometimes they have to stick you more than	10	A. The subject investigators.
11	once to get the catheter. Sometimes that catheter	11	Q. And what did they do?
12	stops working, and requires another stick to get	12	A. They would be physicians who would monitor
13	another catheter.	13	the studies.
14	Q. Well, I was reading in some of these	14	Q. Did you do any hiring and firing of anyone
15	studies that Mr. Wallace participated in, there were,	15	else?
16	In one occasion, 20 blood draws. And another case, I	16	A. No.
17	forgot how many blood draws. If he had a catheter	17	Q. Who did that?
18	in, the blood could be drawn through the catheter	18	A. We had an HR department.
19	without the need to have a needle inserted in the	19	Q. At St. Charles, or was it in Canada?
20	veln; correct?	20	A. We have one in both.
21	A. Assuming that the catheter functioned the	21	Q. Okay. And you hired and fired the sub
22	entire study.	22	Investigators? Can you give me the name of some of
23	Q. Yes.	23	the sub investigators that you hired?
24	A. If there were outpatient visits, we would	24	A. I hired Dr. Milford, and Dr. Markollari.
	38		40
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## Case: 4:18-cv-01859-PLC B8c: #: 136-2 Filed: 07/129/120 Page: 11 of 39 PageIB #: 8482

1	Q. Can you spell that one?	1	In a study like this where there are a lot of needle
2	A. M-A-R-K-O-L-L-A-R-I-A. There was Dr.	2	sticks versus one catheter, which is safer for the
3	Tables,	3	patient? Or for the study participant, I should say?
4	Q. Spelled like it sounds?	4	MS, DREW: Object to the form of the
5	A. Yes. And Dr. Buchanan. There was also a	5	question; vague.
6	Dr. Scaduto, who I did not hire. He started at the	6	You can go ahead and answer,
7	same time as me, and was hired by Latifa.	7	A. Universal precautions are used. You're
8	Q. Can you spell Scaduto?	8	using new needles for each stick. There shouldn't be
9	A. S-C-A-D-U-T-O.	9	a difference.
10	Q. Okay. Did you have to fire any of those	10	Q. (BY MR. WENDLER) Okay. And If universal
11	doctors?	11	precautions are not used, which is safer for the
12	A. Dr. Scaduto.	12	participant?
13	Q. And what was the reason for his	13	MS. DREW: Object to form of the
14	termination?	14	question; vague as to what Isn't being followed by
15	<ol> <li>He had problems with his licensure.</li> </ol>	15	universal precautions.
16	Q. Was Dr. Scaduto involved in either of the	16	Subject to that, you can go ahead
17	studies that we're here about, Study 1 or Study 2?	17	and answer.
18	A. No.	18	A. I can't Universal precautions is such a
19	Q. Okay. Back to the hiring and firing. You	19	standard in medicine. I can't imagine not following
20	didn't participate in any of the hiring or firing of	20	universal precautions. I can't.
21	anyone, other than sub investigators; am I correct?	21	Q. (BY MR. WENDLER) And the reason you want
22	A. Correct.	22	to follow the universal precautions is you want to
23	Q. Okay. Did you ever have any input on any	23	try to avoid transferring blood-borne pathogens like
24	termination decisions on any of the other Pharma	24	Hepatitis C; correct?
	41		43
	May Reporting Service		May Reporting Service
1	Medica employees?	1	A. Correct.
2	A. If I saw something that I was concerned	2	Q. All right. So, if those universal
3	about their job performance, I would certainly say	3	procedures are followed, there is no risk of transfer
4	talk to that individual, and report it to that	4	of blood-borne pathogens like Hepatitis C; am I
5	individual's supervisor.	5	correct?
6	Q. Okay. And had that ever happened when you	6	A. Correct.
7	were employed by Pharma Medica?	7	Q. Okay. If the universal procedures are not
8	A. Yes.	8	followed, which is the safer option for the study
9	Q. Under what circumstances?	9	participant, the needle sticks or the catheter?
10	A. I don't know that I can give you a	10	MS. DREW: Same objection.
11	specific example. I was at Pharma Medica on a	11	A. I don't know that I have an answer for
12	full-time basis, and I was in the clinics. I would	12	that. I can't think of a circumstance where I would
13	observe things. Probably the most common would be a	13	not follow universal precautions.
14	mouth check by a phiebotomist that I didn't think was	14	Q. (BY MR. WENDLER) Okay. Well, were you
15	done properly.	15	constantly monitoring all of the phlebotomists when
16	Q. Okay. Can you think of any other examples	16	you worked at Pharma Medica?
17	where you had to talk to a phlebotomist's supervisor	17	A. Was I constantly monitoring them? No.
18	about the phlebotomist's work?	18	Q. Okay.
19	A. I can't think of any other, off the top of	19	A. I had other job responsibilities.
20	my head.	20	Q. Okay. So you said you can't imagine a
21	Q. Okay. With regard to avoiding the	21	situation where you wouldn't follow the universal
22	transfer of blood-borne pathogens like Hepatitis C,	22	procedures. But If there is a situation where one of
23	which do you feel is safer for the patient, the	23	the phlebotomists is not following the universal
24	needle stick or the catheter in a situation where ***	24	procedures at Pharma Medica, which is the safer
	42		44
	May Reporting Service		May Reporting Service

1	avenue for the participant, the needle sticks or the	1	precautions training.
2	catheters?	2	Q, Okay,
3	MS. DREW: Object to the form of the	3	A. The blood-borne pathogens training. As
4	question as to what part of the universal precautions	4	far as what their education was before they stepped
5	not being followed.	5	in the door, I can't speak to their education before
6	Subject to that, go ahead and	6	they arrived.
7	answer.	7	Q. Okay. The universal precautions training
8	A. I understand that you're saying there was	8	and the blood-borne pathogens training, in those
9	more needle sticks	9	training procedures, do they ever stick needles into
10	Q. (BY MR. WENDLER) Yes.	10	live human being's arms?
11	A than with a catheter. I don't know	11	A. No.
12	that I can assume that one is necessarily safer than	12	Q. Okay. So is it fair to say then that you
13	another. And our phlebotomists were trained in	13	don't know, Dr. Jordan, If any of the phiebotomists
14	universal precautions.	14	hired by Pharma Medica had prior experience sticking
15	Q. Okay. Well, let me ask you this: The	15	needles into live human being's arms before coming to
16	phlebotomists that were trained, did Pharma Medica	16	work for Pharma Medica? You don't know if that
17	ever use any Interns for phlebotomists?	17	happened or not; am I correct?
18	A. Yes.	18	<ol> <li>You had been talking about interns.</li> </ol>
19	Q. Did Pharma Medica ever use phiebotomists	19	Q, Uh-huh.
20	who had no prior experience on real human, sticking	20	A. So, interns were there for a short period
21	needles into veins before they came to work at Pharma	21	of time. They weren't necessarily going to be
22	Medica?	22	continued to be hired on, and to continue to work.
23	A. I don't know the training of the	23	Q. Fair enough. I did switch. Is there a
24	interns	24	difference between a phlebotomist and an Intern?
	45		47
L	May Reporting Service		May Reporting Service
1	Q. Okay,	1	A. Yes.
2	A that were used.	2	Q. All right. What's the difference?
3	Q. All right. Do you know anything about the	3	A. An intern is still in training.
4	training that the interns received before coming to	4	Q. Okay. So, back to my question: Do you
5	work for Pharma Medica?	5	know if there were any interns that were brought into
6	<ol> <li>So, they would be trained at whatever</li> </ol>	6	Pharma Medica who had no prior experience sticking a
7	school of phiebotomy that they were going to.	7	needle in a live human being's arm before coming to
8	Q, Yes, Okay,	8	work at Pharma Medica? Do you know, either way?
9	A. So, I've not visited those schools. I	9	A. And I didn't bring the interns in. I
10	have not seen their	10	didn't interview the interns. I wasn't the one who
11	Q. Specific training?	11	was involved in bringing them in. I don't know what
12	A. Uh-huh.	12	their training location entailed.
13	Q. Correct?	13	Q. Okay. Then You don't know what their
14	A. Correct.	14	experience entailed in terms of sticking needles into
15	Q. So, back to the question: Do you know If	15	live human being's arms; correct?
16	there were ever any Interns that were used by Pharma	16	A. I do not.
17	Medica who, prior to coming to work for Pharma	17	Q. All right. The phlebotomists, do you know
18	Medica, had never inserted a needle into a live human	18	If they had any prior experience in sticking needles
19	being's vein before coming to work at Pharma Medica?	19	into human being's arms, that is living human being's
20	Do you know If that happened?	20	arms, before coming to work at Pharma Medica?
21	A. Again, I was not involved in their When	21	A. So, I did not hire the phiebotomists.
22	the interns came to Pharma Medica	22	Q. Uh-huh.
23	Q. Uh-huh.	23	A. So, I did not interview them about their
24	A they would do our on-site universal	24	exact background and training.
	46		48
	May Reporting Service	<u> </u>	May Reporting Service

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	And then control below (c) be de-	T ,	dealing three
1	Q. And therefore, you don't know if they had	1	dosing time.
2	any experience; correct?	2	Q. Okay. I guess my question wasn't quite
3	A. Correct,	3	clear. My understanding was that the participants
4	Q. All right. You said there was universal	4	would have a tee shirt on with a number on the shirt;
5	precautions training, and blood-borne pathogens	5	correct?
6	training for the interns to follow	6	A. Yes.
7	A. Uh-huh.	7	Q. And they would be called up for their
8	Q. — when they came to came onto Pharma	8	blood draw by the shirt number; correct?
9	Medica; right?	9	A. Yes,
10	A. Yes.	10	Q. And the phlebotomists or the interns would
11	Q. By the way, were the Interns pald, or were	11	have a certain time limit to get the blood drawn; is
12	they there just for the credit hours?	12	that correct?
13	A. I believe it's for credit hours.	13	A. The goal is to draw it on the dosing
14	Q. Okay. Who taught the interns the	14	minute. But if there was difficulty with the blood
15	universal precautions training, and the blood-borne	16	draw, that didn't always happen. But we recorded the
16	pathogens training?	16	time that the blood was drawn.
17	A. I believe that was done through our HR	17	Q. Okay. And my understanding, and correct
18	administrator.	18	me if I'm wrong, but there was a timer that allowed
19	Q. And who was that?	19	for one minute for the blood draw for each
20	A. Debble Elderton.	20	participant. Is that your understanding?
21	Q. Can you spell her last name?	21	A. We want to draw the blood sample according
22	A. E-L-D-E-R-T-O-N.	22	to their dosing minute.
23	Q. There are currently no Pharma Medica	23	Q. Okay.
24	employees that worked at the St. Charles facility	24	A. So, yes.
	49		51
ļ	May Reporting Service		May Reporting Service
1	where you worked that are still employed by Pharma	1	Q. Okay. And what happened if you couldn't
2	Medica, to your knowledge?	2	get the blood drawn within that minute? Do you tell
3	A. No.	3	the participant to go elsewhere, and pull up the next
4	Q. Am I right?	4	participant, or what happened?
5	A. To my knowledge, correct. Yes. Dr. Khan	5	A. We typically would have what we would call
6	still works for Pharma Medica. He was here on-site	6	a backup draw person. So, if there was difficulty
7	for a bit, but he's back in Canada.	7	drawing a subject's blood, they would be directed to
8	Q. Anyone else, besides him?	8	go to the next table, and the backup draw person
9	A. No.	9	would draw the blood.
10	Q. Okay. Now, since you worked at Pharma	10	Q. Okay. And just so I'm clear, where the
11	Medica on a regular basis, is it correct that there	11	blood draw area was, did you say there were no video
12	were actually in the blood draw areas What do you	12	cameras observing that area?
13	call the blood draw areas?	13	A. I know that I've seen video cameras
14	A. Call it the blood draw area.	14	directed to the parking lots, into the dosing areas.
15	Q. Okay. Were there timers set up there so	15	I don't know that it was specifically pointed at the
16	that the participants would come in, and they would	16	blood drawing area.
17	have to have their blood drawn within a certain time?	17	Q. Was there a place at Pharma Medica in St,
18	A. Uh-huh.	18	Charles where you could actually watch the video feed
19	Q. Yes?	19	on a TV screen, or a monitor?
20	A. Yes.	20	A. You would have to log into a computer
21	Q. Okay. Do you know what that time limit	21	network access,
22	was?	22	Q. So, you could do that through your
23	A. So, the protocol would list certain time	23	computer?
24	points that the blood was to be drawn, based on their	24	A. You know, Mo sald he was going to give me
	50	1	52
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access. I never, never used it from my office. So I Dr. Khan, or anyone else, and the person at the other end of the phone would say, 'Hey, I just saw on the 2 never viewed that. If I needed to view something, I would typically have gone to either Mo or Shabaz's 3 video feed something happened, and I want to draw your attention to It.' And the something could be 4 4 office to view it. Б anything? 5 Q. All right. So at Mo's office, or Shabaz's 6 A, I don't believe so. office you could watch the video feed that Pharma 6 Medica had in St. Charles; correct? 7 Q. Do you know if that ever happened to 7 8 Α. You could. anyone at Pharma Medica in St. Charles, that they received a phone call from someone who was watching 9 And Mo and Shabaz had an office in St. Q, the video feed, and wanted to bring their attention 10 Charles; correct? to some problem? 11 11 Α. And that's where you would ---12 I don't know. 12 A. Q. Did anyone ever tell you, Dr. Jordan, why 13 13 Q. A. Uh-huh. 14 the video cameras were there in the first place? 14 Q. -- on occasion watch the video feeds; 15 I don't know that they specifically told 15 correct? 16 me why they were there. 16 A. Uh-huh. Yes? 17 Q. Generally, did anyone tell you? 17 Q. 18 Other than just to know that they were 18 Α. Yes. A. there, so if there was problems with the dosing, or 19 19 Q. Do you -- And as you sit here today, you if they were directed at the parking lot, as well, if 20 just don't recall whether there was a video feed for there was any problems in the parking lot. 21 the blood drew area; correct? 21 22 Okay. What would the parking lot 22 We had multiple different clinics. When Q. 23 you look at the screens, there's multiple different problems, what would that entail? areas where videos were. I couldn't tell you with 24 Well, people's cars were out there. If 53 May Reporting Service May Reporting Service there was any reports that someone's car had been certainty, 'Did it that get this blood draw area?' tampered with, that there was ---2 It might have. It might not have. 3 Q. When you say there were multiple different Okay. 3 4 A. clinics, are you talking about there were different -- cameras. studies going on simultaneously? Б Did you ever ask anyone, Dr. Jordan, If Б there is any video recordings made of the needle 6 A، Yes. Okay. And then you sald that you never 7 stick area during Study 1 or Study 2 that we're here 7 Q. accessed the video feed from your computer at your 8 about today? 8 9 Did I ever ask anyone? office. Did you ever access the video feeds from A٠ 10 10 Q. Right. your computer at home? 11 11 A. No, I didn't ever ask anyone. A. Oh, no. 12 You want to check that? 12 Q. Could you, If you had wanted to? Q. 13 A. That's okay. 13 A. Do you know who occupies the Pharma Medica All right. During your employment at 14 Pharma Medica, at any time, have you ever been 15 facility currently? The St. Charles facility, that alerted to a needle stick from any employee, or 16 is? 17 intern, or phiebotomist that was not in compliance 17 Α. No. 18 with the universal precautions training, and 18 Did you ever receive a phone call from Dr. blood-borne pathogens training? 19 Khan, or anyone else, to report they saw something on a video-camera feed, and wanted to draw your 20 Α. 20 You never heard of someone sticking a 21 21 attention to it? Did that ever happen? Q. Can you say that one more time? I'm 22 participant with a needle, and then using the same 22 A. 23 needle on another participant? 23 sorry. 24 24 Sure, Dld you ever get a phone call from Α. No. Q. 56 54

May Reporting Service

			3
1	Q. No one ever reported to you that one of	1	future, and to check the source individual, if they
2	the people drawing blood used a needle on one	2	give you authorization. And in the case of HIV,
3	participant, and tried to use it on a second	3	there is pre I'm sorry. Post-exposure prophylaxis
4	participant? That was never reported to you?	4	that can be offered. So, there are definitely
6	<ol> <li>That was not reported to me.</li> </ol>	5	procedures that you would follow, if that were to
6	Q. Okay. And just so I'm clear, when you say	6	happen,
7	that that was never reported to you, it was never	7	Q. Okay. And you would follow all of those
8	reported to you that someone at Pharma Medica in St.	8	procedures, because you know that If a person uses
9	Charles drew blood from one patient, and used the	9	the same needle on two participants, the second
10	same needle to draw blood on another patient, or	10	participant has a risk of contracting blood-borne
11	attempted to use the same needle to draw blood on	11	pathogens from the first participant; correct?
12	another patient or participant, either by a	12	A. I know that that first participant
13	participant himself or herself, or by an employee, or	13	would've been screened so that they should have been
14	an intern; am I correct?	14	healthy to be in the study. But still, there is a
15	A. Certainly no employees. I do not recall	15	risk, if there is a needle stick, and you would still
16	any any volunteers telling me that. But certainly	16	address that risk,
17	no employees.	17	Q. Okay. And you said the first patient had
18	Q. Okay. How about participants? Did any	18	been screened, but you told me earlier that there is
19	participant ever tell you, 'Hey, look. That woman	19	a possibility that somebody can test negative for the
20	tried to use the same needle on two participants, or	20	Hep C antibody, but still have Hep C; correct?
21	the woman did use the same needle on two	21	A. That is correct.
22	participants.'?	22	Q. All right. So, you would follow the
23	A. No.	23	procedures, if you saw the same needle being used
24	Q. That never happened?	24	twice on two different participants, because you knew
	57		59
	May Reporting Service		May Reporting Service
1	A. No.	1	the second participant ran the risk of contracting a
2	Q. Okay. If you had observed an employee or	2	blood-borne pathogen from the reuse of the needle;
3	an intern at Pharma Medica using the same needle on	3	correct?
4	two different study participants, what would you have	4	A. Correct.
5	done?	5	Q. I asked you earlier if you had ever fired
6	MS. DREW: Object to the form of the	6	anyone. And you said that you were in charge of the
7	question; improper hypothetical.	7	sub Investigators only. But do you know if anyone
8	You can go ahead and answer.	8	else at Pharma Medica ever fired any phiebotomists?
9	A. That would've been very shocking to see.	9	A. I do know phiebotomists were terminated.
10	If I would've seen someone not change the needle, I	10	Q. Okay.
11	would've said, 'No, don't stick that. You've aiready	11	<ol> <li>I was not typically involved in that</li> </ol>
12	used that.'	12	decision.
13	Q. (BY MR, WENDLER) Okay. What if you saw	13	Q. Do you know why any of them were
14	someone using the needle on the second participant,	14	terminated?
15	and the needle was already in the patient's in the	15	A. We had a wide number of phiebotomists. I
16	participant's arm? What would you do?	16	believe the most common reason was for attendance.
17	<ol> <li>You would tell them to take the needle</li> </ol>	17	Q. Okay. Do you know if any of the
18	out. And then you would have to handle the	18	phlebotomists were ever fired for not following the
19	situation, which would be If there is concern	19	blood-borne pathogen
20	about a needle-stick injury, there are procedures to	20	A. I'm not aware.
21	followa	21	Q, procedures?
22	Q. And what are those procedures?	22	A. I'm not aware of the individual reasons
23	A. It would be to draw blood tests to	23	why all of the phlebotomists were fired.
24	determine their antibody level now, and then in the	24	Q. Okay. Who was in charge of hiring and
	58		60
	May Reporting Service		May Reporting Service
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1	firing the phiebotomists? Do you know?	1	Q. (BY MR. WENDLER) Uh-huh.
2	A. Typically, our HR department would be.	2	A. Most participants did not want to have
3	Q. Debbie again?	3	tape on their arm.
4	A, She was part of the HR team.	4	Q. Right.
5	Q. Again, would she be in charge of hiring	6	A. Because of the multiple blood draws, tape
6	and firing the phiebotomists?	6	on and off would be irritating. So, they would use
7	A. It would be Donna Hileman.	7	the cotton balls. The cotton ball would have to go
8	Q. Donna Hileman? H	8	somewhere.
9	A I-L-E-M-A-N.	9	Q. Right.
10	Q. What about the Interns? Who was in charge	10	A. If they were on a seated restriction, they
11	of bringing in and getting rid of the interns?	11	would commonly put it on a cup on the table that
12	A. I know that Donna did that, as well.	12	staff would come by and collect the cup to put it in
13	Q. Do you agree, Dr. Jordan, that it's not	13	the to dispose of them.
14	safe to let different study group participants share	14	Q. Right. So back to my question: Do you
15	the same unmarked plastic cups to dispose of bloody	15	think it's safe or unsafe to use the same type of
16	cotton balls when drinking cups on the tables are	16	cups for bloody cotton balls as water drinking cups
17	Identical?	17	on the same tables?
18	MS. DREW: Object to the form of the	18	A. I guess I don't
19	question; improper hypothetical.	19	MS. DREW: Same objection.
20	You can go ahead and answer.	20	You can answer.
21	A. So, I'm sorry. Say that question again.	21	A. I can't see how a subject would try to
22	Q. (BY MR. WENDLER) Sure. Let me just back	22	drink the bloody cotton balls.
23	up and preface it by a little explanation.	23	Q. (BY MR. WENDLER) Okay, So you think it's
24	I've seen photographs of the blood draw	24	safe to have that, the same type of cups for bloody
	61		63
	May Reporting Service		May Reporting Service
1	area where there was a cup for bloody cotton balls	1	cotton balls as for water cups on the same table?
2	that they used to, you know, absorb the blood after	2	You think it's safe?
3	the needle sticks. Do you know what I'm talking	3	MS. DREW: Same objection;
4	about?	4	argumentative.
5	A. Yes.	5	You can answer,
6	Q. Okay. And on those tables there would	6	A. I mean, I clearly don't want a subject to
7	also be a water cup for the participant. Do you know	7	ingest someone else's blood. That's not appropriate.
8	what I'm talking about?	8	I don't
9	A. Yes.	9	Q. (BY MR. WENDLER) Not safe?
10	Q. Do you think it's unsafe to let different	10	A. Yeah.
11	participants share the same unmarked plastic cup to	11	MS. DREW: Object to the form.
12	dispose of bloody cotton balls when the drinking cups	12	A. Not safe.
13	on the tables are identical to the bloody cotton ball	13	Q. (BY MR. WENDLER) Okay.
14	cups? Do you think that's unsafe?	14	A. Not safe for a subject to drink to
15	MS. DREW: Same objection.	15	ingest someone else's cotton ball.
16	A. Are you asking if I think a subject would	16	Q. The interns that Pharma Medica used, do
17	try to drink a	17	you know how they were recruited?
18	Q. (BY MR. WENDLER) No?	18	A, I do not.
19	A thing of cotton balls.	19	Q. All right. Do you know if any of the
20	Q. No. No. I'm asking you: Do you think	20	Interns were tested for blood-borne pathogens before
21	It's safe or unsafe to have identical cups for bloody	21	coming onboard and working at Pharma Medica?
22	cotton balls and water cups on the same table?	22	A. I do not.
23	MS. DREW: Same objection.	23	Q. How about the regular employees, the
24	A. You know, you have You're bleeding.	24	phlebotomists or other employees, do you know if they
	62		64
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1	were tested for blood-borne pathogens before coming	1	Q. Okay. There were never any Hepatitis C
2	to work for Pharma Medica?	2	trials at Pharma Medica
3	A. I do not.	3	A. No.
4.	Q. Generally speaking, Dr. Jordan, as a	4	Q In St. Charles, to your knowledge?
5	person trained in medicine, do you agree that a	5	A. No.
6	needle should never be reused in a clinical testing	6	Q. Right,
7	lab environment like Pharma Medica?	7	A, No.
8	A. Yes.	8	Q, Correct?
9	Q. Okay. Do you agree that Mr. Wallace	9	A, Correct.
10	would've never gotten into a study at Pharma Medica	10	Q. Was Mr. Wallace tested for Hepatitis C
11	If he had tested positive for Hepatitis C?	11	before each Pharma Medica study that he participated
12	A. Yes.	12	In?
13	Q. And do you agree that now that he has	13	MS. DREW: Object to the form of the
14	tested positive for Hepatitis C he is no longer	14	question; speculation to the extent of her time
15	eligible to participate in paid studies by Pharma	15	period at Pharma Medica.
16	Medica?	16	Go ahead.
17	A. So, our St. Louis site is closed down.	17	A. That's true.
18	Q، Okay،	18	Part of the general screening criteria at
19	A. There are Hepatitis C trials going on.	19	Pharma Medica would be to test for Hepatitis C
20	Q. Okay,	20	antibodies.
21	A. Are they doing them at Pharma Medica	21	Q. (BY MR. WENDLER) And that has always been
22	Canada? I can't I don't know what studies they're	22	the case since you worked for Pharma Medica?
23	doing there.	23	A. Since I worked for Pharma Medica, yes.
24	Q. So in order to get into a Hepatitis C	24	Q. So, If Mr. Wallace wanted to get Into
	65		67
	May Reporting Service		May Reporting Service
1	trial, do you have to have a history of having	1	Pharma Medica's study during the time you worked for
2	Hepatitis C?	2	Pharma Medica, he had to be pre-tested or
3	A. It would be in the inclusion criteria.	3	pre-screened, and not test positive for Hepatitis C;
4	Q. Okay. And how many of those studies are	4	am I correct?
5	there, do you know?	6	A, Yes.
6	A. I don't know.	6	Q. Okay. Can you tell me, Dr. Jordan, what
7	Q. Okay. Are they few and far between, or	7	are the symptoms one would expect, if they had
8	are they pretty	8	Hepatitis C?
9	A. I don't know.	9	A. The vast majority of people who have
10	Q. Okay. Other than the Hepatitis C trials,	10	Hepatitis C are asymptomatic.
11	are you aware that Mr. Wallace is no longer eligible	11	Q. Okay. How about the ones that have
12	to participate in any clinical studies because he has	12	symptoms? What are the common symptoms in those
13	tested positive for Hepatitis C?	13	people?
14	MS. DREW: Object to the form of the	14	A. The common symptoms would be fatigue,
15	question; speculation.	15	nausea, jaundice, pale stools, dark urine, and
16	You can answer, If you know.	16	abdominal pain.
17	A. Again, it would depend on the	17	Q. Did Mr. Wallace have all of those?
18	inclusion/exclusion criteria of the study. If it's a	18	MS. DREW: Object to the form of the
19	healthy-volunteer study, then he wouldn't qualify.	19	question; speculation.
20	Q, (BY MR, WENDLER) Okay, And the	20	If you know.
21	hundred-plus Pharma Medica studies that you did in	21	A. I couldn't say that he had all of them. I
22	St. Charles, were they all healthy-volunteer criteria	22	know he had several symptoms.
23	studies?	23	Q. (BY MR, WENDLER) Okay. Can you tell
24	A. They were.	24	me I know you told me before that you're not an
	66		68
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1	expert on Hepatitis C. But can you tell me, what are	1	find specifically. I do remember that he had had
2	the long-term health consequences of Hepatitis C, if	2	elevated liver enzymes.
3	you know?	3	Q. Are you looking for the adverse
4	MS. DREW: Object to the form of the	4	A. I'm looking past this stuff,
6	question; to the extent there are different types of	5	Q. Adverse event reports, is that what you're
6	Hepatitis C.	6	looking for?
7	Go ahead. You can answer.	7	<ol> <li>I think it'd probably be there.</li> </ol>
8	A. Okay. So, the long-term consequences of	8	Q. I probably have that marked for you, If
9	Hepatitis C? The long-term consequences could be	9	you Okay. Do you have the West-Ward one in front
10	cirrhosis, fibrosis, and cancer.	10	of you?
11	Q. (BY MR. WENDLER) Have you ever heard of	11	A. That's not the one that That would've
12	Hepatitis C causing arthritis?	12	been, I believe, the sponsor is the one who does
13	A. I don't know that I can say that I've	13	that.
14	specifically heard of it causing arthritis.	14	Q. Here, let me just mark as Exhibit No. 3
15	Q. Do you know, either way, whether Hepatitis	15	the adverse event report. I think that might be what
16	C can cause or contribute to arthritis? Do you know,	16	you're looking for.
17	elther way?	17	(Whereupon, Plaintiff's
18	A. Cirrhosis can be involved in a lot of	18	Exhibit No. 3 was marked
19	other processes. Arthritis does not sound familiar	19	for identification by the
20	as a common association with Hepatitis C, to my	20	court reporter,)
21	knowledge.	21	A. Yes,
22	Q. All right. On the morning of June 26th,	22	Q. (BY MR. WENDLER) Okay. And that is the
23	2016, I'll take you back to when you went to Anderson	23	adverse event report related to Mr. Wallace that you
24	Hospital in Maryville. Do you remember that day?	24	helped create; am I correct?
	69		71
	May Reporting Service		May Reporting Service
1	A. I do.	1	A. Correct.
2	Q. Okay. What was the purpose of that visit?	2	Q. And If we look on Page 1, which is Bates
3	A. So, as the principal investigator, subject	3	numbered 00261, it lists the sponsor as Roxane
4	safety is my job. And if one of my subjects ended up	4	Laboratories, Inc., and the investigator, Dr. Heather
5	in the hospital, I'm concerned about them, and I want	5	Jordan; correct?
6	to see how they are.	6	A. Yes.
7	Q. Okay.	7	Q. All right. So, I guess the question that
8	A. The sponsor needs to be aware if there is	8	brought us here Is: What symptoms were you aware of
9	any serious adverse events. And to be able to	9	that Mr. Wallace was having before you arrived at
10	communicate to the sponsor that one of the subjects	10	Anderson Hospital on June 26, 2016?
11	had something happen to them. The sponsor wants to	11	A. We had done blood tests to show that his
12	know those things.	12	liver enzymes were elevated.
13	Q. Were you concerned, at that point, that	13	Q. Uh-huh.
14	perhaps Mr. Wallace had had an adverse event from the	14	A. And I My understanding was after Let
15	medication that was administered by Pharma Medica?	15	me find it here. So, reviewing the record, I'm just
16	A. At the time that I was going, I didn't	16	trying to find the day that he had He had blood
17	know the whole story. I had heard he was in the	17	drawn on the 25th that was markedly elevated. And so
18	hospital. Most of the subjects in our studies don't	18	we added on blood tests to see if we could determine
19	end up in the hospital.	19	If there was what the cause of the elevation of
20	Q. Well, what did you know when you went to	20	those liver enzymes were.
21	the hospital? What did you know? Before you arrived	21	Q. Uh-huh.
22	there, what did you know about Mr. Wallace's	22	A. And then the next day, it was reported to
23	condition?	23	me that he had been I don't know that it was that
24	A. I would have to look back in the record to	24	next day.
	70		72
Į		1	NA TO A TO A

		This advance over the same that the con-	1	A. Bio Pharma Services.
1	AL - 07"	This adverse event report says that it was	1 2	A. Blo Pharma Services. Q. Okay. And let me ask you this, in
2		that we found out he had been admitted to	3	general, about the adverse event report. Are these
3		Ital. And being admitted to the hospital et the criteria for a serious adverse event.	4	sent to the federal government?
4		Okay, Just for point of clarification, I	6	A. So, we document it, and send it to the
5	Q.	went to Anderson Hospital on the 26th of	6	sponsor. The sponsor does have reporting
6	•	you not? Oh, I'm sorry. Your report says	7	requirements to the F.D.A.
8	the 27th	•	8	Q. All right. And we have I'm going to
9	tile 27 til	MS. DREW; Correct, Yeah.	9	mark as Exhibit 4, which appears to be a lot of
10	Q.	(BY MR. WENDLER) Okay. Well, let me ask	10	duplication of Exhibit 3. The West-Ward Himka
11	•	How did you know Mr. Wallace was at	11	adverse event report.
12	•	Hospital?	12	(Whereupon, Plaintiff's
13	Anderson A.	The study coordinator had told me early in	13	Exhibit No. 4 was marked
14		ning that he had been admitted to the	14	for Identification by the
15	hospital	<del>-</del>	15	court reporter.)
16	Q,	And who was the study coordinator?	16	Q. (BY MR. WENDLER) Is this Exhibit 4, is
17	Δ. Α.	We had three study coordinators at that	17	this what was submitted to the federal government
18		can't recall if it was Stacey or Israa. But	18	with regard to Mr. Wallace's condition?
19		em let me know that he was in the hospital.	19	A, This would have been done by the sponsor.
20	Q,	What's Stacey's last name?	20	Q. Yes.
21	Α.	Miner.	21	A. So it would It appears that it is.
22	Q.	M-I	22	Q. All right. So the study that you helped
23	Α.	M-I-N-E-R.	23	create, the adverse event report that we've marked as
24	Q.	And what's Israa?	24	Exhibit No. 3, was not sent to the federal
		73		76
		May Reporting Service		May Reporting Service
		~	1	a war a fall communicate broadly and by the a
1	A.	I-S-R-A-A.	! '	government. Instead it was sent instead to the
2	A. Q,	Last name?	2	sponsor; correct?
i i	-		1	sponsor; correct? A. Correct.
2	Q, A. Q.	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you	2	sponsor; correct?  A. Correct. Q. And the sponsor, In turn, created a report
3	Q, A. Q. that Mr. \	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you  Vallace was at Anderson Hospital In	2 3 4 5	sponsor; correct?  A. Correct. Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report
3 4	Q, A. Q.	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you  Vallace was at Anderson Hospital In	2 3 4 5 6	sponsor; correct?  A. Correct. Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government;
2 3 4 5	Q. A. Q. that Mr. \ Maryville;	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you  Vallace was at Anderson Hospital In  right?  Yes.	2 3 4 5 6 7	sponsor; correct?  A. Correct. Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?
2 3 4 5 6	Q, A. Q. that Mr. \ Maryville; A. Q.	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you  Vallace was at Anderson Hospital In  right?  Yes.  And you then, on June 27th, or June,	2 3 4 5 6 7 8	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.
2 3 4 5 6 7 8 9	Q. A. Q. that Mr. \ Maryville; A. Q. whatever	Last name?  Dlab, D-I-A-B.  Okay. One of those two persons told you  Vallace was at Anderson Hospital In  right?  Yes.  And you then, on June 27th, or June,  the specific date was, you drove over to	2 3 4 5 6 7 8 9	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these
2 3 4 5 6 7 8 9	Q. A. Q. that Mr. \ Maryville; A. Q. whatever	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital in right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?	2 3 4 5 6 7 8 9	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm
2 3 4 5 6 7 8 9 10	Q, A. Q. that Mr. \ Maryville; A. Q. whatever Anderson A.	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital In right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis.	2 3 4 5 6 7 8 9 10	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal
2 3 4 5 6 7 8 9 10 11	Q. A. Q. that Mr. \\ Maryville; A. Q. whatever Anderson A. Q.	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital in right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis.  Okay. Louis what?	2 3 4 5 6 7 8 9 10 11	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government?
2 3 4 5 6 7 8 9 10 11 12 13	Q, A, Q, that Mr. \ Maryville; A, Q, whatever Anderson A, Q,	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital In right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis.  Okay. Louis what?  Louis Co.	2 3 4 5 6 7 8 9 10 11 12 13	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government?  A. So, in the ICF, there is a statement about
2 3 4 5 6 7 8 9 10 11 12 13	Q, A. Q. that Mr. \ Maryville; A. Q. whatever Anderson A. Q. A. Q.	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital In right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis.  Okay. Louis what?  Louis Co.  C-O?	2 3 4 5 6 7 8 9 10 11 12 13	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government?  A. So, in the ICF, there is a statement about who would have access to your records.
2 3 4 5 6 7 8 9 10 11 12 13 14 15	Q. A. Q. that Mr. \\ Maryville; A. Q. whatever Anderson A. Q. A. Q. A.	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital in right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis. Okay. Louis what? Louis Co. C-O? Uh-huh.	2 3 4 5 6 7 8 9 10 11 12 13 14 15	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government?  A. So, in the ICF, there is a statement about who would have access to your records.  Q. Okay.
2 3 4 5 6 7 8 9 10 11 12 13 14 15	Q, A, Q, that Mr. \ Maryville; A, Q, whatever Anderson A, Q, A, Q, A, Q,	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital In right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis. Okay. Louis what? Louis Co. C-O? Uh-huh. Yes?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government?  A. So, in the ICF, there is a statement about who would have access to your records.  Q. Okay.  A. So, it says, "The following people will
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	Q, A. Q. that Mr. \ Maryville; A. Q. whatever Anderson A. Q. A. Q. A. A. A.	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you  Vallace was at Anderson Hospital in right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis. Okay. Louis what? Louis Co. C-O? Uh-huh. Yes? Yes.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government?  A. So, in the ICF, there is a statement about who would have access to your records.  Q. Okay.  A. So, it says, "The following people will have access to your study records: The study doctor,
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Q, A. Q. that Mr. \ Maryville; A. Q. whatever Anderson A. Q. A. Q. A. Q. A. Q.	Last name?  Diab, D-I-A-B. Okay. One of those two persons told you Vallace was at Anderson Hospital In right? Yes. And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct? I rode with Louis. Okay. Louis what? Louis Co. C-O? Uh-huh. Yes? Yes. What's his position?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government?  A. So, in the ICF, there is a statement about who would have access to your records.  Q. Okay.  A. So, it says, "The following people will have access to your study records: The study doctor, the study monitor, auditor, sponsor company, or
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	Q, A, Q, that Mr. \ Maryville; A, Q, whatever Anderson A, Q, A, Q, A, Q, A, Q, A, A, A,	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital In right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis. Okay. Louis what? Louis Co. C-O? Uh-huh. Yes? Yes. What's his position? He was our senior director of clinical	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	sponsor; correct?  A. Correct.  Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct?  A. Yes.  Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government?  A. So, in the ICF, there is a statement about who would have access to your records.  Q. Okay.  A. So, it says, "The following people will have access to your study records: The study doctor, the study monitor, auditor, sponsor company, or research institution, the United States F.D.A.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	Q, A. Q. that Mr. \ Maryville; A. Q. whatever Anderson A. Q. A. Q. A. Q. A. Q. A. Q. A. Operatio	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital In right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis.  Okay. Louis what?  Louis Co.  C-O?  Uh-huh.  Yes?  Yes.  What's his position?  He was our senior director of clinical ms.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	A. Correct. Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct? A. Yes. Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government? A. So, in the ICF, there is a statement about who would have access to your records. Q. Okay. A. So, it says, "The following people will have access to your study records: The study doctor, the study monitor, auditor, sponsor company, or research institution, the United States F.D.A. Q. What's the Bates number of the page you're
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	Q, A. Q. that Mr. \ Maryville; A. Q. whatever Anderson A. Q.	Last name?  Diab, D-I-A-B. Okay. One of those two persons told you Vallace was at Anderson Hospital In right? Yes. And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct? I rode with Louis. Okay. Louis what? Louis Co. C-O? Uh-huh. Yes? Yes. What's his position? He was our senior director of clinical ns. Do you know what he does now for a living?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	A. Correct. Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct? A. Yes. Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government? A. So, in the ICF, there is a statement about who would have access to your records. Q. Okay. A. So, it says, "The following people will have access to your study records: The study doctor, the study monitor, auditor, sponsor company, or research institution, the United States F.D.A. Q. What's the Bates number of the page you're reading from?
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q, A, Q, that Mr. \ Maryville; A, Q, whatever Anderson A, Q, A, Q, A, Q, A, Q, A, Q, A,	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Valiace was at Anderson Hospital in right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis. Okay. Louis what? Louis Co. C-O? Uh-huh. Yes? Yes. What's his position? He was our senior director of clinical ns.  Do you know what he does now for a living? I know he works for a different company.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	A. Correct. Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct? A. Yes. Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government? A. So, in the ICF, there is a statement about who would have access to your records. Q. Okay. A. So, it says, "The following people will have access to your study records: The study doctor, the study monitor, auditor, sponsor company, or research institution, the United States F.D.A. Q. What's the Bates number of the page you're reading from? A. PMRI 00012.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	Q, A. Q. that Mr. \ Maryville; A. Q. whatever Anderson A. Q. A. Q. A. Q. A. Q. A. I don't k	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital in right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis. Okay. Louis what? Louis Co. C-O? Uh-huh. Yes? Yes. What's his position? He was our senior director of clinical ns. Do you know what he does now for a living? I know he works for a different company. now his job title.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	A. Correct. Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct? A. Yes. Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government? A. So, in the ICF, there is a statement about who would have access to your records. Q. Okay. A. So, it says, "The following people will have access to your study records: The study doctor, the study monitor, auditor, sponsor company, or research institution, the United States F.D.A. Q. What's the Bates number of the page you're reading from? A. PMRI 00012. Q. Okay. And just so we're clear, Exhibit 3
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q, A, Q, that Mr. \ Maryville; A, Q, whatever Anderson A, Q, A, Q, A, Q, A, Q, A, Q, A,	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital In right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis. Okay. Louis what? Louis Co. C-O? Uh-huh. Yes? Yes. What's his position? He was our senior director of clinical ns. Do you know what he does now for a living? I know he works for a different company. now his job title. Do you know the name of the company?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	A. Correct. Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct? A. Yes. Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government? A. So, in the ICF, there is a statement about who would have access to your records. Q. Okay. A. So, it says, "The following people will have access to your study records: The study doctor, the study monitor, auditor, sponsor company, or research institution, the United States F.D.A. Q. What's the Bates number of the page you're reading from? A. PMRI 00012.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	Q, A. Q. that Mr. \ Maryville; A. Q. whatever Anderson A. Q. A. Q. A. Q. A. Q. A. I don't k	Last name?  Diab, D-I-A-B.  Okay. One of those two persons told you Vallace was at Anderson Hospital in right?  Yes.  And you then, on June 27th, or June, the specific date was, you drove over to Hospital; correct?  I rode with Louis. Okay. Louis what? Louis Co. C-O? Uh-huh. Yes? Yes. What's his position? He was our senior director of clinical ns. Do you know what he does now for a living? I know he works for a different company. now his job title.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	A. Correct. Q. And the sponsor, in turn, created a report that duplicates, in large part, what your report says, and then sent it to the federal government; correct? A. Yes. Q. Okay. Do you know, Dr. Jordan, if these reports, are they supposed to be confidential? I'm just curious, if they're sent to the federal government? A. So, in the ICF, there is a statement about who would have access to your records. Q. Okay. A. So, it says, "The following people will have access to your study records: The study doctor, the study monitor, auditor, sponsor company, or research institution, the United States F.D.A. Q. What's the Bates number of the page you're reading from? A. PMRI 00012. Q. Okay. And just so we're clear, Exhibit 3 and Exhibit 4 related to Study No. 2 that Mr. Wallace

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1	was in; correct?	1	that his ALT reading was more than double the high
2	A. Correct. That language is standard for	2	end of the normal range?
3	the informed consent. So it would be in the informed	3	A. No.
4	consent for Study No. 2, as well.	4	Q. According to the same document, on June 21
5	Q. Okay. And it says that you were the	5	Mr. Wallace's AST, his liver enzyme score was 253.
6	Investigator on the adverse event report. What does	6	Again, the normal range is 10 to 40. Do you see
7	that mean, you were the Investigator?	7	that?
8	A. That means that I was a principal	8	A. Yes,
9	investigator of the study.	9	Q. Did anyone tell Mr. Wallace on June 21
10	Q. Okay. Is that your title at Pharma Medica	10	that his liver enzyme reading was more than six times
11	for all purposes, or just for adverse event reports?	11	the high end of the normal range?
12	A. No, for all purposes.	12	A. What I read on the documentation, the
13	Q. Okay, All right. According to this	13	staff attempted to contact the subject at 16:00 on
14	document that we've marked as Exhibit No. 3, on Page	14	June 21st, but the subject was unable to be reached,
15	3 It says on June 15 Mr. Wallace's AST was 59.	15	and a message was left.
16	First, what is an AST?	16	Q. Okay. So other than leaving the message,
17	A. That's a shortened name of a common liver	17	no one told Mr. Wallace?
18	enzyme.	18	A. We attempted to contact Mr. Wallace.
19	Q. And It says that his AST on June 15 was	19	Q. When participants like Mr. Wallace sign up
	•	20	for your studies, did they give an emergency contact,
20 21	59, and the normal range is between 10 and 40;	21	alternate number to reach?
	correct?	22	
22	A. Correct.	23	•
23	Q. Did you tell Mr. Wallace, or did anyone		Q. Did someone try to contact Mr. Wallace's
24	tell Mr. Wallace, at that point in time, that his	24	emergency contact? 79
	77		19
	May Reporting Service	l	May Reporting Service
1	May Reporting Service	1	May Reporting Service  A. That was not documented.
1 2	liver enzymes were high?	1 2	A. That was not documented.
2	liver enzymes were high?  A. So, it looks like that So, I would say	2	A. That was not documented. Q. So therefore, It didn't happen?
2	liver enzymes were high?  A. So, it looks like that So, I would say that level, when it comes to liver enzymes, is	2 3	A. That was not documented. Q. So therefore, It didn't happen? MS. DREW: Object to the form of the
2 3 4	liver enzymes were high?  A. So, it looks like that So, I would say that level, when it comes to liver enzymes, is outside of the normal range.	2 3 4	A. That was not documented. Q. So therefore, it didn't happen? MS. DREW: Object to the form of the question; misstates the evidence.
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and AST scores were extremely high; correct? 1 Q. Okay. So, were you the person that 2 A٠ Yes. actually received the lab results? 3 3 Q. Who? Who attempted to call him on June Α. So, the lab results would come to our printer. Then the study coordinator would bring them 4 21? 5 5 On June 21, I -- I don't see -- I don't to me, and I would sign them. 6 Okay. And then you would look at the lab 6 know who tried to call him on June 21. 7 results, and determine whether the participant needs All right. Well, the adverse event report says, "Staff attempted to contact the subject at 8 to be contacted; right? 8 9 Α. 16:00 June 21, but the subject was unable to be Yes. 10 Q. reached, and a message was left." Do you see that? And when you saw the numbers of Mr. AST 10 11 of 253, and ALT of 471, you knew those were alarming Α. numbers, and you said someone needs to contact 12 Q, You don't know who that staff member was? 13 13 A. Mr. Wallace; correct? I do not. 14 14 And since it says 16:00, is it safe to Α. Yes. 15 assume that there was only one attempt made, a single 15 Q. All right. Did you expect they would only 16 phone call? 16 attempt to contact him once? 17 We have a protocol as far as how we can 17 A. I would say that's correct. 18 Q. Okay. And you were looking at some 18 contact subjects. So, typically you would contact records to try to figure out who made that call. 19 them at the time. And then we can't keep calling 19 20 What are you looking at? someone over and over again because that could be 21 This is the medical adverse event comments viewed as harassment. If they don't choose to take A. 22 our phone call, we can't make them. 22 page. 23 23 Should there be a notation in there to So your expectation was only one call Q. document who made that call on June 21? 24 would be made? 83 81 May Reporting Service May Reporting Service 1 We called him more than once. We called 1 A. Typically, this is where I would look, I A. don't know if it were --- If it was documented 2 hlm --3 On June 21? somewhere else. Perhaps it was documented on a lab Q. 4 4 page. I don't know where that time came from. A. Uh-huh. Oh, on June 21? I think that's a reasonable, that we called and left a message, and 5 Q. Okay. Well, who would be the typical you can hear the message, and call us back. 6 person to make a call like that to Mr. Wallace? Is 7 Okay. So just so I'm clear, it was your 7 there someone who is charged with that kind of expectation on June 21 when you saw those alarming 8 responsibility? 9 A٠ Typically, it would be a study numbers that only one call need be made to coordinator. Mr. Wallace, and If he didn't answer, just leave a 10 11 11 message, and that was sufficient? Q. Okay. And who were the study 12 12 coordinators? MS. DREW: Object to the form. That was Stacey, Israa, and then I believe 13 13 Α. Q. (BY MR. WENDLER) That was your 14 14 Ben was a study coordinator, at that time, as well. expectation? 15 Q, And what's Ben's last name? 15 MS, DREW: Object to the form of the 16 question. I believe it misstates her testimony. She 16 Α. Swan. 17 17 Q. And why do you say it was their job to did not say alarming. 18 make those calls as --18 Subject to that, you can go ahead 19 Α. Typically, that's -- I would assess the 19 and answer. 20 20 Q. (BY MR. WENDLER) Go ahead. labs. I would take the labs to the study coordinator. If there was any that were particularly 21 My expectation was we call the subject, 22 out of range, I would say, 'Call that to their and get ahold of the subject, and talk to them, and attention, that this person needs to be contacted take care of what needed to be done at that time. 23 regarding these results. That was my expectation. If the subject doesn't 82

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1	answer their phone call, then we need to leave a	1	Q. Right.
2	message.	2	A. The INR, the muscle enzymes, the renal
3	Q. Okay. And is there a reason you didn't	3	panel, and the Hepatitis panel to get a broader
4	contact Mr. Wallace's emergency contact person? Just	4	picture. And some people would be symptomatic, and
6	never occurred to you?	5	so that was I need to see him. I need to see how
6	MS. DREW: Object to the form of the	6	he's feeling. I remember that I was like, "When can
7	question.	7	he come in?" And so they told me he could come in
8	A. I We just I can't answer that. I	8	the next day. So, I will be there. I need to take
9	don't know.	9	care of him, and make sure he is is okay.
10	Q. (BY MR. WENDLER) Okay. All right. Let's	10	Q. Okay. You understood Mr. Wallace lived in
11	move on to next readings. It looks like on June 25	11	Illinois; right?
12	we have some more readings that came in; correct?	12	A. I I don't know that I knew where he
13	A. Yes.	13	lived at the time.
14	Q. And on that Strike that.	14	<ul> <li>Q. Okay. Well, regardless of where he lived,</li> </ul>
15	On June 25 when Mr. Wallace's new results	15	is there a reason that you thought It Important that
16	came in, his AST was now 900 when the normal range it	16	he come back to Pharma Medica in St. Charles,
17	10 to 40; correct?	17	Missourl, rather than go to the nearest emergency
18	A. Correct.	18	room or nearest hospital to get treatment for these
19	Q. And his ALT on June 25 was 1,800 when the	19	high liver enzyme readings?
20	normal range is 9 to 46; correct?	20	A. So, our site is in St. Charles.
21	A. Correct.	21	Q. Սի-իսի.
22	Q. Were you there when his blood was drawn on	22	A. And if I'm taking care of you, I'm going
23	the 24th of June?	23	to take care of you on our site. If you are
24	A. I don't recali.	24	symptomatic, which at the time, I don't believe that
	85		87
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1	Q. Do you know if anyone told him on the 24th	1	I was aware that he had symptoms. If I'd had known
2	of June about these high numbers that pre-dated June	2	he had symptoms, I would've been like, 'Well, you can
3	24? Do you know?	3	go to the emergency room.' That's always an option.
4	A. I don't know the person's name. If we are	4	I'd never tell somebody they couldn't go to the
5	calling you back to do repeat testing, we wouldn't do	5	emergency room, if they were having severe symptoms.
6	repeat testing for no reason.	6	Q. But you weren't taking care of him as a
7	Q. Okay.	7	treating doctor. You told me that earlier; right?
8	A. So it should've been told to him that,	8	A. Correct.
9	'Your liver enzymes are high. We need to re-test	9	Q. Okay, So
10	them.'	10	A. But if he is having an adverse event, if
11	Q. Okay. So the reason that he came in for	11	we did end of study labs, we're seeing them get
12	the third sample on June 24 was because the liver	12	worse, that's my responsibility. I need to take care
13	enzymes were so high; right?	13	of that. And if there's If there is something
14	A. Yes.	14	else that is so severe you need to go to the
15	Q. Okay. And is there a reason why you had	15	hospital, then that's what we do.
16	him come back to Pharma Medica in St. Charles, rather	16	Q. Okay. Well, did Pharma Medica do anything
17	than just go to the nearest emergency room or	17	to dissuade Mr. Wallace from going to the hospital
18	hospital?	18	emergency room at any point in time?
19	A. So, when I see liver enzymes high	19	A. Would I personally ever tell someone, 'No,
20	Q, Uh-huh.	20	you can't go.'? No.
21	A. — the thought is we need to investigate	21	Q. Okay. That's not the question. Did
22	further, which we ordered the further blood tests.	22	Pharma Medica, not Just you, but did anyone at Pharma
23	Q. Okay.	23	Medica, to your knowledge, ever do anything to
24	<ol> <li>The blood count, the liver enzymes.</li> </ol>	24	dissuade Mr. Wallace from going to a local hospital
	86		88
	May Reporting Service	<u> </u>	May Reporting Service

1	emergency room for these high liver enzyme	1	Q. That's not quite
2	conditions?	2	A, I wouldn't
3	A. To me, that seems like a broad question.	3	Q. Sorry. Go ahead and finish.
4	Q, It Is,	4	A. No. No. What is your question? I'm
5	A. I can say what I did. I would not	5	sorry.
6	dissuade. If someone If I am seeing elevated	6	Q. You're not quite answering my question.
7	liver enzymes, and I'm like, 'Are you sick? Then you	7	First of all, did you want Mr. Wallace to
8	can go to the emergency room.' That's an acceptable	8	return to Pharma Medica for a fourth round of tests
9	thing to do.	9	on June 26th rather than go to the nearest emergency
10	Q. Okay. And you said you would not dissuade	10	room? Did you want that?
11	him from going to the local emergency room. Why	11	A. I wanted him to be assessed by someone
12	would you not dissuade him from doing that?	12	medical. And when you are in the study that I am
13	A. If someone is ill and in need of	13	leading, I'm happy to do that assessment. You are
14	treatment, that's You do You take care of the	14	welcome to come here, and I will assess you.
15	patient. That's what's necessary.	15	Q. Okay, So you didn't do anything to
16	Q. Did anyone from Pharma Medica tell you	16	dissuade him from going to the nearest emergency room
17	that they tried to dissuade him from going to the	17	on June 26th; am I correct?
18	local emergency room, and Instead tried to get him to	18	A. Correct.
19	come back to Pharma Medica for yet another blood	19	Q. Okay. All right. When you arrived at
20	draw? Did anyone ever tell you that?	20	Anderson Hospital, you wanted Mr. Wallace to sign a
21	A. Not to my knowledge.	21	medical records release form; correct?
22	Q. Would that be contrary to what you	22	A. It would be helpful. So, when he had been
23	expected of the Pharma Medica people when you worked	23	admitted, he had by definition
24	there?	24	Q. I'm not asking you why. I'm just asking
	89		91
ļ	May Reporting Service		May Reporting Service
1	A. Yes.	1	you: Dld you?
2	Q. Okay. And is it your testimony that you	2	A. Yes.
3	did not want Mr. Wallace to return for a fourth round	3	Q. Did you want
4	of tests on June 26th rather than go to the nearest	4	A. Yes.
5	emergency room?	5	Q Mr. Wallace to sign a medical records
6	<ol> <li>It was clear that he needed further</li> </ol>	6	release form at
7	follow-up and testing.	7	A. Yes, I did.
8	Q. Uh-huh.	8	Q Anderson Hospital? Yes?
9	A. If I can see him, and evaluate him, and	9	A. Yes.
10	see does he look well? Does he need a liver	10	Q. Okay. And when you arrived at Anderson
11	ultrasound? Does he need a CT? Those are things	11	Hospital Strike that.
12	that I can do.	12	Why did you want him to sign that medical
13	Q. Uh-huh.	13	records release form?
14	A. If I see him and he is not well, and he	14	A. So, he was admitted to the hospital.
15	needs urgent care, then I can take care of that.	15	Q. Right.
16	Q. Okay. So back to my question, though: Is	16	A. So, part of the reporting criteria is that
17	It your testimony that you did not want Mr. Wallace	17	I needed to give the sponsor the necessary
18	to return to Pharma Medica for a fourth round of	18	information so they could report it to the F.D.A.
19	tests on June 26th rather than go to the nearest	19	Q. Okay. And Mr. Wallace declined to sign
20	emergency room?	20	that medical records release form; correct?
21	A. We contacted him to notify him that his	21	A. I don't I can't remember if he did or
22	liver enzymes were elevated, and that he needed to be	22	not. I think he Let's see. I don't recall if he
23	seen, and that I could see him. That I could see	23	signed it or not.
24	him, and this says the 26th.	24	Q. Okay. Fair enough.
	90	1	92
1	May Reporting Service		May Reporting Service

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1	•	1	A. No.
2	Hospital with Louis Co?	2	Q. During the screening process, if a
3	A. Uh-huh.	3	participant tests positive for Hepatitis C, does
4	Q, Rìght?	4	Pharma Medica report that to the state?
6	A, Yes.	5	A. Typically, they would.
6	Q. Did he drive, or did you drive?	6	Q. Okay. And has that occurred before, where
7	A. He drove.	7	Pharma Medica reported a participant or participants,
8	Q. And where was he when you went in the	8	plural, for testing positive for Hepatitis C?
9	hospital?	9	A, Yes.
10	A. I don't I think he was in the hospital.	10	Q. Who was It that reported them? Was that
11	I don't know where in the hospital he was.	11	your job, or someone else's?
12	Q. You went into Mr. Wallace's room; correct?	12	<ul> <li>A. That would typically be, if it was at</li> </ul>
13	A. Correct.	13	screening, it would be the screening manager who
14	Q. Did Mr. Co come with you into the room?	14	would typically do that.
15	A. I don't believe so. I think it was just	15	Q. A screening manager? And who would be a
16	myself.	16	screening manager?
17	Q. Okay.	17	A. The person's name?
18	MR. WENDLER: Why don't we take a	18	Q, Yes,
19		19	A. Kim clause.
20	MS, DREW: Sounds good,	20	Q. Ken?
21	(Whereupon, a brief recess	21	A. Kim.
22		22	Q, Kim?
23	•	23	A, K-I-M.
24		24	Q, K-L-A-U-S?
	93		95
	May Reporting Service		May Reporting Service
1	should've asked earlier, but it occurred to me during	1	A. K-L-A-S-S.
2	the break.	2	Q. And you said if that was found positive at
3	But first of all, you told me earlier that	3	the screening. Would there be any other situations
4	when the study participants are screened, they're	4	where someone would test positive for Hepatitis C
5	tested for Hepatitis C; right?	5	where Pharma Medica would report it to the state?
6	A. Correct.	6	A. Yes.
7	Q. That's in the screening process; correct?	7	Q. When?
8	A. Correct.	8	<ul> <li>A. So in this case, it would be reported to</li> </ul>
9	Q. Are the study participants also tested	9	the state, but it would be the study coordinators
10	again when they check in for the study?	10	that would do it.
11	A. Tested for?	11	Q. Okay. How about during the study itself,
12	Q. For Hepatitis C?	12	has It ever Has It ever occurred that someone
13	<ol> <li>A. Not unless it's specified by the protocol.</li> </ol>	13	tested positive in the middle of a study for
14	That would not be a routine test in most protocol	. 14	Hepatitis C?
15	Q. Okay. Can you tell me in Study No. 1	15	A. We don't routinely test for Hepatitis C in
16	whether that was a required test?	16	the middle of a study.
17	A. No.	17	Q. Okay. At the end of the study, do you
18	Q, It was not?	18	test for Hepatitis C?
19	A. No.	19	A. Not routinely.
20	Q. Okay. How about In Study No. 2, was a	20	Q. Okay,
21	blood-borne pathogens test required at the time of	21	A. Again, that would be determined by the
22	check-in for participants	22	protocol.
23	A. No.	23	Q. All right. And how was Mr. Wallace's
24	Q for Study No. 2?	24	Hepatitis C discovered?
	94		96
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1	A. Because his liver enzymes were elevated.	1	A. Yes.
2	Q. Okay. And that prompted additional	2	Q. Okay.
3	testing?	3	A. It was not It was like a compound name
4	A. Correct.	4	that I don't remember the It was letters and
5	Q. Okay. Dld you turn Strike that.	6	numbers together, but I don't recall the number.
6	Did you report Mr. Wallace to the State of	6	Q. And what department in the State of
7	Missouri for being Hepatitis C positive?	7	Missouri are these reported to?
8	A. Yes.	8	A. The health department.
9	Q. Okay. In your career at Pharma Medica,	9	Q. Okay. Okay. Back to Anderson Hospital.
10	approximately how many times have you reported	10	When you got there, did you tell Mr. Wallace that you
11	patients to the State of Missouri for testing	11	were already en route to Pharma Medica when you got
12	positive for Hepatitis C?	12	the call, and you diverted to go to Anderson
13	A. I don't think I could give you an exact	13	Hospital?
14	number.	14	A. No. I had arrived to Pharma Medica that
15	Q. Just ball park is fine?	15	day. And I was informed that he was in the hospital.
16	A. At screening, maybe two or three per year	16	And that's when I said, 'Well, I need to go check on
17	through screening	17	him to see that he is okay. And see what's going on
18	Q. Okay.	18	that he's in the hospital.'
19	A would be an estimate.	19	Q. Okay,
20	Q. And how about after screening?	20	A. And Louis was like, 'I'll drive you.'
21	A. So, like after a study?	21	Q. Okay. So you didn't tell Mr. Wallace that
22	Q. Right.	22	you were on your way to Pharma Medica when you got
23	A. I can only recall one other time that	23	the call, and you diverted to Anderson Hospital prior
24	there was a Hepatitis C after screening after	24	to going to Pharma Medica? You didn't tell him that?
	97		99
	May Reporting Service		May Reporting Service
1	study.	1	A. I don't recall that.
2	Q. Okay, Do you remember that patient's	2	Q. Okay, When you got to Anderson Hospital,
3	name, or are you at liberty to stay?	3	did you talk to any of the doctors or nurses?
4	MS. DREW: I'm going to instruct her	4	A. When I was in the room with Mr. Wallace, a
6	not to answer as to the patient's name,	5	couple of staff members came in.
6	Q. (BY MR. WENDLER) Okay. Let me just ask	6	Q. Yes.
7	you. Without telling me the patient's name, do you	7	A. So, I had my name badge on so that it was
8	know the patient's name?	8	obvious who I was, that I wasn't related to
9	A. I know what study the patient was the	9	Mr. Wallace, and that I didn't work for the hospital.
10	subject was in.	10	And I handed them my card so that they knew who I
11	Q, Okay,	11	Was.
12	A. I don't know that	12	Q. Okay. This was a nurse, or nurses, or the
13	Q. Okay.	13	doctor, or who was it?
14	A I remember the name.	14	A. I would say it was a staff member. I don't believe it was a doctor. I believe it was a
15	Q. Which study was it? Was it before, or	15 16	nurse, perhaps a nurse practitioner. I don't believe
16	after, or during the study?  A. Not during. It was after. I'm just	17	I spoke to any doctors there.
17		18	
18	thinking. I can think of the study. I knew the		
19	study number like five minutes ago. I don't know	19 20	Hospital staff members, whether it's a nurse, a doctor, or otherwise, about Mr. Wallace being in a
20	that I can It's just slipped my mind.		•
21	Q. Do you remember what the drug was that was	21 22	study?  A, I did. I gave them my card because that's
22	being tested, or the time frame?  A. I know it was last summer. It was	23	A, I did. I gave them my card because that's crucial medical information. If he's in the
23		24	hospital, and he recently took a study drug, that's
24	Q. The summer of '18?	44	100
	98 May Panading Sanda		
L	May Reporting Service		May Reporting Service

1	Information that's crucial to his treatments.	1	Q. All right. Did you report Mr. Wallace's
2	Q. Okay, Did you tell this to the doctor, or	2	Hepatitis condition to anyone, other than the State
3	to the nurses, or who did you tell that to?	3	of Missouri Department of Health?
4	A. Again, I don't believe I talked to any	4	A. We reported it to the sponsor.
5	doctors.	5	Q. Anyone else?
6	Q. Okay. And did you tell them anything more	6	A. The sponsor would've reported it to the
7	about the study that he was in?	7	F.D.A.
8	A. I believe that we took Louis had	8	Q. Did you report it to anyone else?
9	printed off some information. I believe that it was	9	A. Other than the documentation that's here,
10	the lab levels that we had been drawing. Perhaps it	10	I didn't report it to anyone else.
11	might've been more. I don't remember what we took	11	Q. Okay. And you Just so I'm clear, you
12	with us. But information for that we left on his	12	never provided any treatment to Mr. Wallace for
13	table so that he could share that with medical staff	13	Hepatitis C; correct?
14	to let them know.	14	A. Correct.
15	Q. Whose table?	15	Q. And the reason you didn't provide
16	A. You know the little tables that they have	16	treatment was what?
17	at the hospital?	17	A. So, it depends Treatment for Hepatitis
18	Q. The food tables that was In Mr. Wallace's	18	C is typically done by hepatologists, which I'm not a
19	room?	19	specialist of liver disease.
20	A. Yes, Uh-huh.	20	Q. Okay. Did Pharma Medica ever offer to pay
21	Q. All right, So you left it there for	21	for any of Mr. Wallace's treatment?
22	Mr. Wallace to give to the doctors?	22	A, I don't know that. I don't know if that
23	A. So that it was there. So if they had	23	was offered or not.
24	questions, this is is what drug we administered to	24	Q. All right. Turning to Exhibit 3 on Page
	101	~ `	103
	May Reporting Service		May Reporting Service
1	him,	1	5, is that your signature?
2	Q. When you went to the hospital, dld you go	2	A. It is.
2 3	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to	2	A. It is. Q. How about on Page 8, is that also your
2 3 4	Q. When you went to the hospital, dld you go there on your own accord, or dld someone tell you to go?	2 3 4	A. It is. Q. How about on Page 8, is that also your signature there?
2 3	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord.	2	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes.
2 3 4 5	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord.  Q. Okay. And just so I'm clear, you never	2 3 4 5 6	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for
2 3 4 5 6 7	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson	2 3 4 5 6 7	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants?
2 3 4 5 6 7 8	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?	2 3 4 5 6 7 8	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. I don't understand the question.
2 3 4 5 6 7 8 9	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I	2 3 4 5 6 7 8 9	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. X don't understand the question. Q. Well, have you ever filled out an adverse
2 3 4 5 6 7 8 9	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I believe that I know that I talked to two staff	2 3 4 5 6 7 8 9	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. X don't understand the question. Q. Well, have you ever filled out an adverse event report for any participant, other than
2 3 4 5 6 7 8 9 10	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I believe that I know that I talked to two staff members that were both female. I believe one was a	2 3 4 5 6 7 8 9 10	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. I don't understand the question. Q. Well, have you ever filled out an adverse event report for any participant, other than Mr. Wallace?
2 3 4 5 6 7 8 9 10 11	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I believe that I know that I talked to two staff members that were both female. I believe one was a nurse, and a nurse practitioner. I don't recall any	2 3 4 5 6 7 8 9 10 11 12	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. X don't understand the question. Q. Well, have you ever filled out an adverse event report for any participant, other than Mr. Wallace? A. So, this adverse event would be a severe
2 3 4 5 6 7 8 9 10 11 12 13	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I believe that I know that I talked to two staff members that were both female. I believe one was a nurse, and a nurse practitioner. I don't recall any of them being a physician.	2 3 4 5 6 7 8 9 10 11 12 13	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. I don't understand the question. Q. Well, have you ever filled out an adverse event report for any participant, other than Mr. Wallace? A. So, this adverse event would be a severe adverse event. Any severe adverse event would follow
2 3 4 5 6 7 8 9 10 11 12 13 14	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I believe that I know that I talked to two staff members that were both female. I believe one was a nurse, and a nurse practitioner. I don't recall any of them being a physician.  Q. Is there anything that you said to the	2 3 4 5 6 7 8 9 10 11 12 13	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. I don't understand the question. Q. Well, have you ever filled out an adverse event report for any participant, other than Mr. Wallace? A. So, this adverse event would be a severe adverse event. Any severe adverse event would follow this format. So, yes.
2 3 4 5 6 7 8 9 10 11 12 13 14 15	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I believe that I know that I talked to two staff members that were both female. I believe one was a nurse, and a nurse practitioner. I don't recall any of them being a physician.  Q. Is there anything that you said to the nurses or nurse practitioner, other than what you've	2 3 4 5 6 7 8 9 10 11 12 13 14	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. I don't understand the question. Q. Well, have you ever filled out an adverse event report for any participant, other than Mr. Wallace? A. So, this adverse event would be a severe adverse event. Any severe adverse event would follow this format. So, yes. Q. Okay. And how many times have you
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I believe that I know that I talked to two staff members that were both female. I believe one was a nurse, and a nurse practitioner. I don't recall any of them being a physician.  Q. Is there anything that you said to the nurses or nurse practitioner, other than what you've told me about already?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. I don't understand the question. Q. Well, have you ever filled out an adverse event report for any participant, other than Mr. Wallace? A. So, this adverse event would be a severe adverse event. Any severe adverse event would follow this format. So, yes. Q. Okay. And how many times have you submitted adverse event reports?
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I believe that I know that I talked to two staff members that were both female. I believe one was a nurse, and a nurse practitioner. I don't recall any of them being a physician.  Q. Is there anything that you said to the nurses or nurse practitioner, other than what you've told me about already?  A. No.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. I don't understand the question. Q. Well, have you ever filled out an adverse event report for any participant, other than Mr. Wallace? A. So, this adverse event would be a severe adverse event. Any severe adverse event would follow this format. So, yes. Q. Okay. And how many times have you submitted adverse event reports? A. I don't know that I could give you a
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I believe that I know that I talked to two staff members that were both female. I believe one was a nurse, and a nurse practitioner. I don't recall any of them being a physician.  Q. Is there anything that you said to the nurses or nurse practitioner, other than what you've told me about already?  A. No. Q. Other than the adverse event report, did	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. I don't understand the question. Q. Well, have you ever filled out an adverse event report for any participant, other than Mr. Wallace? A. So, this adverse event would be a severe adverse event. Any severe adverse event would follow this format. So, yes. Q. Okay. And how many times have you submitted adverse event reports? A. I don't know that I could give you a number.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	Q. When you went to the hospital, did you go there on your own accord, or did someone tell you to go?  A. I went on my own accord. Q. Okay. And just so I'm clear, you never spoke to any of Mr. Wallace's doctors at Anderson Hospital; correct?  A. I I don't believe that I did. I believe that I know that I talked to two staff members that were both female. I believe one was a nurse, and a nurse practitioner. I don't recall any of them being a physician.  Q. Is there anything that you said to the nurses or nurse practitioner, other than what you've told me about already?  A. No. Q. Other than the adverse event report, did you create any record or report of your trip to	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	A. It is. Q. How about on Page 8, is that also your signature there? A. Yes. Q. Did you ever report adverse events for other study participants? A. I don't understand the question. Q. Well, have you ever filled out an adverse event report for any participant, other than Mr. Wallace? A. So, this adverse event would be a severe adverse event. Any severe adverse event would follow this format. So, yes. Q. Okay. And how many times have you submitted adverse event reports? A. I don't know that I could give you a number. Q. Just ball park?
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1	Q. Do you know, one way or the other, Dr.	1	438, this is a three-page memo or e-mail that was
2	Jordan, If any of the employees at Pharma Medica	2	written by Mr. Wallace that was attached to the
3	during the time of the study that we're here about	3	West-Ward adverse event report. But I want you to
4	today, If any of the employees had Hepatitis C? Do	4	read through that, if you need to, and tell me if
5	you know, one way or the other?	5	there is anything in there that you disagree with?
6	A. I do not know.	6	And If so, just blurt it out as you're reading.
7	Q. And that same would be true for the other	7	A. I actually authored a reply to this to
8	study that we're here about today, too; right?	8	Salus IRB.
9	A. Correct.	9	Q. Okay. And is that in that stack of
10	Q. After Mr. Wallace was diagnosed with	10	documents that you reviewed before the deposition?
11	Hepatitis C, did Pharma Medica do anything to screen	11	A. I don't know.
12	or test the Pharma Medica employees, or any other	12	Q. Okay. And you shared that reply to Salus
13	participants in the study?	13	IRB?
14	A. No. I will say not to my knowledge.	14	A. So, Salus IRB, they're in charge of
15	Q. Okay. If you could turn to Exhibit No. 4,	15	subject safety. So, if a subject complains to them,
16	the West-Ward adverse event report?	16	it's my job to respond to the complaint. So I did
17	A. Uh-huh.	17	provide a written response to the IRB regarding that.
18	Q. I think you've already told us this is the	18	Q. And you sent it to the IRB?
19	study that also relates to Mr. Wallace; correct? I'm	19	A. Uh-huh.
20	sorry. It's the adverse event report that relates to	20	Q. Yes?
21	Mr. Wallace?	21	A. Yes.
22	A. Yes.	22	Q. Okay. Go ahead. Go ahead and read
23	Q. Right? On Page Bates numbered 431, down	23	through what Mr. Wallace wrote, and tell me what you
24	at the bottom where it says other remarks, it says,	24	disagree with?
	105		107
	May Reporting Service		May Reporting Service
1	"Investigator's assessment of causality: The	1	A. Well, probably He says we did not
2	Increased AST and ALT levels, and Hepatitis C are	2	bother to tell him his labs were off. We had made
3	unlikely related to the study drug." Do you see	3	several attempts to contact him about it, his labs.
4	that?	4	Q. Okay, Keep going,
5	A, Yes.	5	A. I would be surprised if Israa told him, if
6	Q. Dld you write that?	6	he said he had symptoms, that Israa would say, 'No,
7	MS. DREW: I'm going to object to	7	just come back.'
8	the form of the question because she's already	8	Q. Okay, You said you'd be surprised. But
9	testified that Exhibit 4 was authored by the sponsor.	9	I'm asking what you can tell me as a matter of fact
10	Subject to that, you can go ahead	10	you know that you disagree with?
11	and answer, if you know.	11	A. Well, I wasn't on that phone call between
12	A. So, I assessed the AEs. And on our AE	12	Israa and Mr. Wallace. I know Israa. I know that if
13	form, I assessed that the causality was unlikely.	13	someone was complaining of symptoms such as, 'My head
14	Q. (BY MR. WENDLER) Okay. And what you	14	hurts really bad, and I'm short of breath,' that if
15	meant by that is you don't feel there was anything in	15	she didn't medically know, she would contact me.
16	the drug itself that Mr. Wallace was testing as a	16	Q. Okay, And Israa Is the woman you spoke
17	participant that caused Hepatitis C; correct?	17	about earlier, but Mr. Wallace spelled I-S-S-I-A?
18	A. Correct.	18	A, Issia. I would assume that's Israa. We
19	Q. Okay, And the reason I ask you about this	19	don't have an Issia that worked for us.
20	Is it says, "Investigator's assessment." And you	20	Q. And remind me what Israa's last name is?
21	were the investigator that is being referenced here;	21	A. Diab.
22	correct?	22	Q. Can you spell that?
23	A. Yes.	23	A. D-I-A-B.
24	Q. Okay. All right. If you turn to Page	24	Q. Okay. Keep going. What else do you
	106		108
	May Reporting Service		May Reporting Service

	Case. 4.10-cv-01009-FLC Doc. #. 101-2		
1	disagree with in Mr. Wallace's narrative here?	1	Q. Okay.
2	A. It was against Pharma Medica's wishes that	2	A. ** to assess his discharge.
3	he went to the hospital. If he was having shortness	3	Q. What else do you disagree with?
4	of breath, and unbearable stomach pain? Absolutely	4	A. I know Stacey. I worked with her for
5	not. If you're having symptoms that are unbearable,	5	years. I have not witnessed her cussing at subjects,
6	go to the emergency room. That's completely	6	and telling them that they probably shot heroin.
7	acceptable. That would not have been against Pharma	7	Q. What's Stacey's last name?
8	Medica's wishes.	8	A. Miner, M-I-N-E-R.
9	So, he said he was confused how I found	9	Q. Okay. Again, that's something that you
10	him there. He notified us that he was in the	10	don't disagree with, you just find hard to believe?
11	hospital.	11	A. I mean, if I wasn't on the phone call
12	Q. How do you know that?	12	between Stacey and Mr. Wallace, I can't state what
13	A. When I look here Here I go. Stacey	13	happened.
14	documented, "Spoke with subject at 8:55. He stated	14	Q. Okay,
15	he was admitted to the hospital yesterday afternoon,	15	A. However, there was a level of
16	June 26th." So he told our study coordinator that he	16	professionalism that we don't cuss at subjects. We
17	had been admitted.	17	don't accuse them of things that we don't have proof
18	Q. What page were you referring to? What's	18	of.
19	the Bate's number on there?	19	Q. I get it. I'm just trying to speed things
20	A. This one? It's PMRI 00328.	20	up here to try to tell to have you tell me what
21	Q. Okay. Go ahead. Back to Mr. Wallace's	21	you disagree with
22	narrative, what else do you disagree with?	22	A. Okay.
23	A. So, I would just state that I introduced	23	Q not what you want to talk about, or
24	myself to the people who came into the room so there	24	explain, just what you disagree with.
	A - W	l	444
	109	i	111
	May Reporting Service		May Reporting Service
1		1	May Reporting Service  A. I disagree that we would tell him we would
1 2	May Reporting Service	1 2	May Reporting Service  A. I disagree that we would tell him we would have no conversations with him until he's released
	May Reporting Service was no confusion that I was a family member, or	]	May Reporting Service  A. I disagree that we would tell him we would have no conversations with him until he's released hospital records.
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24 make you deal.' He didn't make deals with people.

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I wasn't there --

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24

		1 7	and the state of t
1	Pharma Medica does supply lab work, upon	1	report of the expert that we hired in this case?
2	request, but there is proper procedures that have to	2	A. No, I don't think
3	be taken. So, if someone shows up and says, 'I want	3	Q. Okay. Let me have you take a look at that
4	my records,' you have to fill out a form. It goes to	4	real quick. We'll mark this as Exhibit 5.
5	QA. They're not released until the study is over.	δ.	(Whereupon, Plaintiff's
6	So, that wouldn't typically If someone walked in,	6	Exhibit No. 5 was marked
7	and said, 'Give me my records,' that wouldn't be the	7	for identification by the
8	case.	8	court reporter,)
9	Q. All right. So Mr. Wallace could get any	9	Q. (BY MR, WENDLER) And I would like you to
10	of his records from Pharma Medica by filling out the	10	read through that, and tell me what parts, if
11	form	11	anything, of that you agree with, starting with
12	A, You could.	12	You don't need to read his background and
13	Q and going through proper channels?	13	credentials. But in the narrative section starting
14	A. You could request what records, yes. You	14	on Page 2?
15	could request your lab results.	15	MS, DREW: I'm going to instruct her
16	Q. Okay. For any of the studies?	16	not to answer. She has not reviewed any of the
17	A. Uh-huh.	17	medical records that he has reviewed in this case.
18	Q. Yes?	18	She's not being presented as an expert witness. And
19	<ul> <li>A. You could request your lab results for the</li> </ul>	19	I'm instructing her not to answer.
20	studies, yes.	20	MR, WENDLER: You can't instruct her
21	Q. Okay. And Pharma Medica would produce	21	not to answer unless you're claiming a privilege.
22	those, provided that proper paperwork is filled out;	22	MS. DREW: You're asking for expert
23	correct?	23	testimony.
24	A. Correct.	24	MR. WENDLER: Again, unless you're
	113		115
<u> </u>	May Reporting Service	ļ	May Reporting Service
1	Q. Okay. Anything else you disagree with in	1	claiming privilege, you cannot instruct her not to
2	Mr. Wallace's narrative there?	2	answer the question. That's the rules.
3	A. When it says the doctors aren't sure if	3	Q. (BY MR. WENDLER) So, go ahead and read
4	the study drug was part of the reason, and I I	4	through the narrative section, and tell me if you
5	don't believe that the study drug caused his	5	disagree with anything that that expert wrote?
1		6	A. I would say I have not reviewed any of the
6	Hepatitis C.		· ·
7	Q. Okay.	7	documents that he's listed.
7 8	Q. Okay.  A. So I would disagree that the doctors	7	documents that he's listed.  Q. And that's I understand that. I'm not
7 8 9	Q. Okay.  A. So I would disagree that the doctors aren't sure if the study drug is part of the reason.	7 8 9	documents that he's listed.  Q. And that's I understand that. I'm not suggesting that you have.
7 8 9 10	Q. Okay.  A. So I would disagree that the doctors aren't sure if the study drug is part of the reason.  Q. Anything else that you disagree with?	7 8 9 10	documents that he's listed.  Q. And that's I understand that. I'm not suggesting that you have.  A. I can read the narrative, but I feel like
7 8 9 10	Q. Okay.  A. So I would disagree that the doctors aren't sure if the study drug is part of the reason.  Q. Anything else that you disagree with?  A. I believe I agree with the rest of it.	7 8 9 10	documents that he's listed.  Q. And that's I understand that. I'm not suggesting that you have.  A. I can read the narrative, but I feel like I'm at a disadvantage when I have not reviewed any of
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7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	Q. Okay.  A. So I would disagree that the doctors aren't sure if the study drug is part of the reason.  Q. Anything else that you disagree with?  A. I believe I agree with the rest of it.  Q. Okay. Did Mr. Wallace ever tell you anything that would cause you to think he got Hepatitis C from something else, other than a dirty needle at Pharma Medica?  A. He I did talk to him about other sources. He did deny them.  Q. Okay. So, he didn't tell you anything that would cause you to think he got Hepatitis C from a source, other than from Pharma Medica; am I correct?  A. I'm not assuming he got it from Pharma Medica. But other than that, yes, it's correct.  Q. Okay. Have you ever seen, Dr. Jordan, the	7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	documents that he's listed.  Q. And that's I understand that. I'm not suggesting that you have.  A. I can read the narrative, but I feel like I'm at a disadvantage when I have not reviewed any of the background  MS. DREW: Doctor  A that he has.  MS. DREW: Doctor, if you can't comment, one way or the other, that's a perfectly appropriate answer.  A. Okay.  MS. DREW: You don't have to give an answer, and say what you agree or disagree with since you've already established in direct testimony that you're not an expert in Hepatitis C.  A. I am not an expert. And he's had 27 items of review that I've not reviewed.
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	Q. Okay.  A. So I would disagree that the doctors aren't sure if the study drug is part of the reason.  Q. Anything else that you disagree with?  A. I believe I agree with the rest of it.  Q. Okay. Did Mr. Wallace ever tell you anything that would cause you to think he got Hepatitis C from something else, other than a dirty needle at Pharma Medica?  A. He I did talk to him about other sources. He did deny them.  Q. Okay. So, he didn't tell you anything that would cause you to think he got Hepatitis C from a source, other than from Pharma Medica; am I correct?  A. I'm not assuming he got it from Pharma Medica. But other than that, yes, it's correct.	7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	documents that he's listed.  Q. And that's I understand that. I'm not suggesting that you have.  A. I can read the narrative, but I feel like  I'm at a disadvantage when I have not reviewed any of the background  MS. DREW: Doctor  A that he has.  MS. DREW: Doctor, if you can't comment, one way or the other, that's a perfectly appropriate answer.  A. Okay.  MS. DREW: You don't have to give an answer, and say what you agree or disagree with since you've already established in direct testimony that you're not an expert in Hepatitis C.  A. I am not an expert. And he's had 27 items

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1	Q. (BY MR. WENDLER) Okay. And I I am not	1	Q. (BY MR. WENDLER) Again, therefore, you
2	suggesting that you have reviewed it. I just want to	2	cannot say it's incorrect or correct? And I don't
3	know if there is anything in the expert's report that	3	care about that. What I want to know is if there is
4	he says that you say, 'I know that's wrong.'	4	something that he wrote that you say, 'I know that is
5	MS. DREW: Objection.	Б	incorrect, Teli me what it is?
6	Q. (BY MR, WENDLER) Without reading the	6	MS, DREW: You know what? I'm going
7	records, without reviewing anything	7	to object to the question. I'm going to instruct her
8	MS. DREW: Object to the form of the	8	not to answer. And you can take it up with the
9	question.	9	judge. Certify the question. Go for it.
10	Q. (BY MR. WENDLER) If you can tell me	10	Q. (BY MR. WENDLER) Well, are you going to
11	something that he wrote that	11	refuse to answer this question?
12	MS, DREW: Object to the form of the	12	A, I'm going to follow my the advice of my
13	question; speculation.	13	attorney.
14	MR. WENDLER: Would you let me	14	Q. Okay. And therefore, not answer the
15	finish, please?	15	question?
16	MS. DREW: Sure.	16	A. Yes, I will not answer the question.
17		17	MR. WENDLER: Okay. The questions
18	Q. (BY MR. WENDLER) I want to know if there is something he wrote that you, as you sit here	18	will be certified. And that would include all the
19	today, without reading any of the records, without	19	questions relative to the narrative section of Dr.
1	reviewing anything that he's looked at, that you can	20	Hull's report,
20		21	Q. (BY MR. WENDLER) How about in the
21	tell me that you say, 'I know he's wrong.' That's	22	Hepatitis C section, can you go there, starting on
22	all I'm asking?	23	Page 3? Bottom of Page 3?
23	MS. DREW: Object to the form of the	24	MS, DREW: Same objections. She's
24	question; calls for speculation; calls for improper	24	119
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1	May Reporting Service medical testimony, and expert testimony.	1	already testified that she's not an expert in
2	Q. (BY MR. WENDLER) Go ahead.	2	Hepatitis, and asking her to speculate in a field
3	A. I would say this is seven pages with a lot	3	that she's not trained in is inappropriate. It's an
4	of detail that I can't specifically	4	improper question. It's asking for expert testimony.
5	Q. I'm just asking you about the narrative,	5	And I'm going to instruct her not to answer.
	the narrative section.	6	Q. (BY MR. WENDLER) Are you again not going
6 7	A. Well, when I look at this, "Mr. Wallace	7	to answer the question based on the advice of
8	screened at Spaulding Medical on May 18 and 22nd." I	8	A. Correct.
9	don't know that to be true. Is it incorrect? I	9	Q Ms. Drew?
10	don't know that it's incorrect, but I don't have	10	A. I am not going to answer based on the
11	Information to know that that's true.	11	advice of my attorney.
12	Q. And that's what I'm getting at. If there	12	Q. Okay. And just so we're clear, If I take
13	Is something in here that you know is incorrect, I'm	13	this up with the judge, and the judge says you have
1	not asking you that you agree with everything else.	14	to come back here and answer these questions, and
14 15	I'm just saying, read this, and tell me if there is	15	maybe pay my attorney's fees for having to come back
16	something in here that you know is incorrect. Not	16	here to do that, you're willing to take that risk?
1		17	MS. DREW: Brian, I am the one
17	necessarily that you agree with everything else he	18	that's willing to take that risk,
18 19	wrote?	19	MR, WENDLER: I'm not talking to
1	MS. DREW: Well	20	you. I'm talking to her,
20	A. Well, I don't know that he screened at	21	MS. DREW: She is my client. You do
21	Spaulding so I can't say that that I know to be	22	not talk to her. You talk to her through me. I am
22	true. I don't know that to be true.	23	representing her. She is a former employee. If you
23	MS. DREW: I'm going to object to		want to violate ethical rules, go ahead and talk to
24	this.	24	want to violate ethical rules, go allead and talk to
	118		
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_		1.	
1	my client directly.	1	A. Correct.
2	MR. WENDLER: Terl, all I'm saying	2	Q. All right.
3	Is when I ask her a question, I don't want an answer	3	MR. WENDLER: Again, certify that
4	from you. You can object all you want. I want	4	section of questions on the discussion section.
5	answers from her, or you tell me she's not going to	6	Q. (BY MR. WENDLER) Then finally on the
6	answer,	6	conclusions section, Dr. Jordan, Dr. Hull has listed
7	MS. DREW: She doesn't have to	7	three opinions there. Can you read through those
8	answer about who's going to take care of any	8	opinions, and tell me if you agree or disagree with
9	attorney's fees. She's being represented through her	9	those conclusions that he that is there in the
10	capacity as a former employee of Pharma Medica.	10	conclusion section?
11	Trying to infer that she personally is responsible	11	MS. DREW: Same objections as
12	for fees is inappropriate, and you know that.	12	before. And I'm instructing her not to answer.
13	MR. WENDLER: I don't know where	13	Q. (BY MR. WENDLER) And again, are you not
14	you're even coming from on this because there's a lot	14	going to answer based on the advice of
15	of inappropriateness going on here, but it's not from	15	A. Yeah.
16	my end.	16	Q Ms. Drew?
17	Q. (BY MR. WENDLER) But anyway, back to the	17	A. Yes.
18	report, Hepatitis C section, ma'am, you're not going	18	Q. Okay.
19	to answer any questions about whether you disagree	19	(Whereupon, Plaintiff's
20	with that; am I correct?	20	Exhibit No. 6 was marked
21	A. Correct.	21	for identification by the
22	Q. And you're not going to tell me if the	22	court reporter.)
23	statement, Hepatitis C is a disease of the liver	23	Q. (BY MR. WENDLER) Handing you Exhibit No.
24	caused by the Hepatitis C virus? You won't tell me	24	6, ma'am, this is Defendant's Second Supplemental
	121		123
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1	If you agree or disagree with that?	1	Rule 26 (a)(1) Disclosures. Do you see that?
2	MS, DREW: I Instruct the witness	2	A. Yes.
3	not to answer.	3	Q. Okay. I'm going to ask you what these
4	MR. WENDLER: Okay. Certify that	4	people did at Pharma Medica, to your knowledge.
		-	a. a
5	entire section of questions on the Hepatitis C	5	Okay?
6	section.	6	A. Uh-huh.
6 7	section. Q. (BY MR. WENDLER) Moving onto the	6 7	A. Uh-huh. Q. What does a group leader do?
6 7 8	section.  Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read	6 7 8	<ul><li>A. Uh-huh.</li><li>Q. What does a group leader do?</li><li>A. A group leader would typically be a</li></ul>
6 7 8 9	section.  Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in	6 7 8 9	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area.
6 7 8 9	section. Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?	6 7 8 9 10	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what?
6 7 8 9 10	section.  Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct	6 7 8 9 10 11	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So
6 7 8 9 10 11 12	section.  Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an	6 7 8 9 10 11 12	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area
6 7 8 9 10 11 12 13	section.  Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume	6 7 8 9 10 11 12 13	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn?
6 7 8 9 10 11 12 13 14	g. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to	6 7 8 9 10 11 12 13	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn? A. Yes.
6 7 8 9 10 11 12 13 14 15	section.  Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And it's improper trying to get her to	6 7 8 9 10 11 12 13 14	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if
6 7 8 9 10 11 12 13 14 15	section.  Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And It's improper trying to get her to comment as a medical provider who's already testified	6 7 8 9 10 11 12 13 14 15	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if any?
6 7 8 9 10 11 12 13 14 15 16	Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And It's improper trying to get her to comment as a medical provider who's already testified her area of expertise is not Hepatitis, to comment on	6 7 8 9 10 11 12 13 14 15 16	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if any? A. That would be the clinic. They would
6 7 8 9 10 11 12 13 14 15 16 17	g. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And it's improper trying to get her to comment as a medical provider who's already testified her area of expertise is not Hepatitis, to comment on an expert who's basing his opinions, discussions on	6 7 8 9 10 11 12 13 14 15 16 17	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if any? A. That would be the clinic. They would supervise
6 7 8 9 10 11 12 13 14 15 16 17 18	Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And It's improper trying to get her to comment as a medical provider who's already testified her area of expertise is not Hepatitis, to comment on an expert who's basing his opinions, discussions on records that Dr. Jordan has not had an opportunity to	6 7 8 9 10 11 12 13 14 15 16 17 18	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if any? A. That would be the clinic. They would supervise the philebotomy staff. They would supervise the sample processing. And they would be in the
6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	g. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And it's improper trying to get her to comment as a medical provider who's already testified her area of expertise is not Hepatitis, to comment on an expert who's basing his opinions, discussions on records that Dr. Jordan has not had an opportunity to review, evaluate, and/or consider.	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if any? A. That would be the clinic. They would supervise the phlebotomy staff. They would supervise the sample processing. And they would be in the clinic as a supervisor.
6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And It's improper trying to get her to comment as a medical provider who's already testified her area of expertise is not Hepatitis, to comment on an expert who's basing his opinions, discussions on records that Dr. Jordan has not had an opportunity to review, evaluate, and/or consider.  Therefore, I'm instructing her not	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if any? A. That would be the clinic. They would supervise the phlebotomy staff. They would supervise the sample processing. And they would be in the clinic as a supervisor. Q. Okay. Starting on Page 2, there are
6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And It's improper trying to get her to comment as a medical provider who's already testified her area of expertise is not Hepatitis, to comment on an expert who's basing his opinions, discussions on records that Dr. Jordan has not had an opportunity to review, evaluate, and/or consider.  Therefore, I'm instructing her not to answer.	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if any? A. That would be the clinic. They would supervise the philebotomy staff. They would supervise the sample processing. And they would be in the clinic as a supervisor. Q. Okay. Starting on Page 2, there are number of people listed here. Dr. Khan,
6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	g. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And It's improper trying to get her to comment as a medical provider who's already testified her area of expertise is not Hepatitis, to comment on an expert who's basing his opinions, discussions on records that Dr. Jordan has not had an opportunity to review, evaluate, and/or consider.  Therefore, I'm instructing her not to answer.  Q. (BY MR. WENDLER) And again, you're not	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So — Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if any? A. That would be the clinic. They would supervise the phlebotomy staff. They would supervise the sample processing. And they would be in the clinic as a supervisor. Q. Okay. Starting on Page 2, there are number of people listed here. Dr. Khan, Mr. Yahmiahi. And then it carries over to the next
6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And It's improper trying to get her to comment as a medical provider who's already testified her area of expertise is not Hepatitis, to comment on an expert who's basing his opinions, discussions on records that Dr. Jordan has not had an opportunity to review, evaluate, and/or consider.  Therefore, I'm instructing her not to answer.  Q. (BY MR. WENDLER) And again, you're not going to answer based on the advice of Ms. Drew?	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if any? A. That would be the clinic. They would supervise the phlebotomy staff. They would supervise the sample processing. And they would be in the clinic as a supervisor. Q. Okay. Starting on Page 2, there are number of people listed here. Dr. Khan, Mr. Yahmlahi. And then it carries over to the next page. All of the persons that are listed with
6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	g. (BY MR. WENDLER) Moving onto the discussion section. Again, I would ask that you read through that, and tell me if there is anything in there that you disagree with that Dr. Hull wrote?  MS. DREW: I am going to instruct Dr. Jordan not to answer the question. It's an inappropriate question, and asks her to assume evidence that she does not have. It causes her to speculate. And It's improper trying to get her to comment as a medical provider who's already testified her area of expertise is not Hepatitis, to comment on an expert who's basing his opinions, discussions on records that Dr. Jordan has not had an opportunity to review, evaluate, and/or consider.  Therefore, I'm instructing her not to answer.  Q. (BY MR. WENDLER) And again, you're not	6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	A. Uh-huh. Q. What does a group leader do? A. A group leader would typically be a supervisor of the clinical area. Q. Supervisor of the what? A. Of the clinical area. So — Q. And the clinical area would be the area where blood is drawn? A. Yes. Q. What other areas would that include, if any? A. That would be the clinic. They would supervise the phlebotomy staff. They would supervise the sample processing. And they would be in the clinic as a supervisor. Q. Okay. Starting on Page 2, there are number of people listed here. Dr. Khan, Mr. Yahmiahi. And then it carries over to the next

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Canadian addresses, can you tell me what they did at Mr. or Mrs Mehan; Is that It? 2 Α, Arun is a protocol writer. 2 Pharma Medica in St. Charles while you were there, 3 Dld he have anything to do with Study One 3 starting with Dr. Khan? Q. 4 So, Dr. Khan was the vice-president of or Study Two In St. Charles? clinical operations. So, he would help in designing б Α. No. He lives in Canada. Б 6 the study to make sure that all of the protocol Q. Mr. Markus, did he have anything to do 7 requirements were met. 7 with Study 1 or Study 2? 8 I don't believe he worked at Pharma Medica 8 And how often was he actually at the St. À٠ 9 at the time. 9 Charles facility when you were in charge there? Okay, Next Is Armando Desousa. Did he 10 10 Q. A. It would depend on the nature of the 11 have anything to do with the Study 1 or Study 2 in 11 study. If it was a more complex study, he would be 12 this case? 12 more likely to come down and stay. 13 13 Α. No. Q. How about for Study No. 1 in this case, Next we have Louis Co. You talked about 14 14 was he involved in that? Q. him a little earlier. But did he have anything to do 15 A, I don't recall that he was. 16 with the study? 16 Q, How about Study No. 2, was Dr. Khan 17 17 involved in that? So, he was our senior director of clinical 18 operations. So, he would be working with Shabaz to 18 I do not recall that he was. A. 19 make certain that the study was planned out such that 19 Q. All right. Do you know if he, Dr. Khan, 20 we knew how many blood draw tables, we had all the 20 had any involvement in either of the studies, 1 or supplies that were required, and the staff that was 21 Study 2, that are involved in this case? 22 22 required. A. He would have to read the protocols. Okay. The staff would include the 23 Q, 23 Q. Uh-huh. 24 Α. He would've communicated with Louis any phlebotomists, and the Interns? 127 125 May Reporting Service May Reporting Service 1 Α. As well as the group leads, and the specifics as far as clinic set-up, or staffing. But he didn't have -- I don't know what else he would've 2 paramedics. 3 Okay. And is he the one that you said now 3 done on the studies, besides that. He was in Canada Q. works for a different pharmaceutical-testing 4 for those, I believe. б facility? 5 Q. Mr. Yamlahi, what did he do in Study 1 or 6 6 Study 2? Α. Do you know how to reach him? Do you have 7 So, Latifa is the clinical trial director. Q, Α. 8 his phone number, or anything like that? 8 She is available for consultation, if there's any 9 I do have his phone number. clinical trial questions. But she was not present Α. 10 Q. for the study. Can you give it to us, please? 10 11 Q. For either one? 11 Α. I don't -- It's in my phone. Do you want 12 me to --12 Α. Correct. 13 13 Is that okay? Q. All right. Mr. Bouhajib? 14 He is in the charge of the bio analytical 14 MS. DREW: Uh-huh. Α. 15 A. Is it not listed in this paper here? 15 lab in Canada. 16 (BY MR. WENDLER) It's listed as Pharma 16 Q. Q. Did he have any involvement in Study 1 or 17 17 Medica. Well, maybe not. Study 2? 18 That's not Pharma Medica's number. 18 I'd have to -- If Pharma Medica did the Α. 19 MS. DREW: No. sample processing, then he would've been in charge of 19 20 how the samples were analyzed in Canada. 20 Q, (BY MR. WENDLER) That is his correct 21 21 number there? Okay. So he was not part of the study as 22 I don't know. I would assume that it is. 22 It took place in St. Charles, Missouri; correct? Α. 23 23 Q. Can you compare it to your number, and let Α. Correct. 24 us know? Q. All right. How about -- The next one is 128 126 May Reporting Service May Reporting Service

1	(Whereupon, an off the	1	A, I have a letter of severance.
2	record discussion was	2	Q. Okay. Was there ever any discussion, or
3	held, which by direction	3	anything in the severance letter that relates to you
4	was not stenographically	4	cooperating in the defense of this lawsuit?
5	reported.)	5	A, No.
6	<ol> <li>I do have a different number.</li> </ol>	6	Q. That was never discussed?
7	Q. (BY MR. WENDLER) Okay. What do you have?	7	A. No.
8	А. 647-621-5580.	8	Q. Did you show up here today just
9	Q. Okay. I'm looking to see if there are any	9	voluntarily?
10	other Canadians on the list. And I don't see any.	10	A. Yes.
11	Okay.	11	Q. Okay. And you're not being paid for your
12	On the list there is a job title called	12	time here today?
13	sub-investigator. For example, Sharon McGlorn?	13	A. Not specific. I mean, the severance did
14	A. Uh-huh.	14	not list this. So, I'm not being compensated in any
15	Q. What dld the sub-investigator do at Pharma	15	other way.
16	Medica?	16	Q. Okay. Was it your understanding that you
17	<ol> <li>So, a sub-investigator was like an</li> </ol>	17	had to show up here as part of your severance
18	extension of myself. So, they would assist with	18	agreement?
19	check-ins. They would assist with monitoring the	19	A, No.
20	dosings. Occasionally they would be on-call. And	20	<ul> <li>Q. So you're just here voluntarily, free of</li> </ul>
21	they were able to assess screening, post-study labs,	21	charge, as far you're concerned?
22	and DCGs, as required.	22	A. Yes.
23	Q. By the way, are you still on the payroli	23	Q. Okay. Do you know, are you eligible for a
24	at Pharma Medica at all?	24	rehire at Pharma Medica?
	129		131
	May Reporting Service		May Reporting Service
1 4	4 V	1	A. They don't have a location in St. Louis.
1	A. I am.	l '	· · · · · · · · · · · · · · · · · · ·
2	Q. And in what capacity?	2	I would imagine I would be eligible for rehire. I
1	<ul><li>Q. And in what capacity?</li><li>A. In terms of a severance.</li></ul>	2	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is
2	<ul><li>Q. And in what capacity?</li><li>A. In terms of a severance.</li><li>Q. Terms of a severance?</li></ul>	3 4	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.
3	<ul><li>Q. And in what capacity?</li><li>A. In terms of a severance.</li><li>Q. Terms of a severance?</li><li>A. Uh-huh.</li></ul>	2	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment
2 3 4 5 6	<ul> <li>Q. And in what capacity?</li> <li>A. In terms of a severance.</li> <li>Q. Terms of a severance?</li> <li>A. Uh-huh.</li> <li>Q. Yes?</li> </ul>	2 3 4 5 6	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said
2 3 4 5	<ul> <li>Q. And in what capacity?</li> <li>A. In terms of a severance.</li> <li>Q. Terms of a severance?</li> <li>A. Uh-huh.</li> <li>Q. Yes?</li> <li>A. Yes.</li> </ul>	2 3 4 5 6 7	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?
2 3 4 5 6	<ul> <li>Q. And in what capacity?</li> <li>A. In terms of a severance.</li> <li>Q. Terms of a severance?</li> <li>A. Uh-huh.</li> <li>Q. Yes?</li> <li>A. Yes.</li> <li>Q. Okay. And tell me your understanding of</li> </ul>	2 3 4 5 6 7 8	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes.
2 3 4 5 6 7 8 9	Q. And in what capacity? A. In terms of a severance. Q. Terms of a severance? A. Uh-huh. Q. Yes? A. Yes. Q. Okay. And tell me your understanding of the severance package that you got?	2 3 4 5 6 7 8 9	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes.  Q. Do you also get a pension of any sort from
2 3 4 5 6 7 8 9	Q. And in what capacity? A. In terms of a severance. Q. Terms of a severance? A. Uh-huh. Q. Yes? A. Yes. Q. Okay. And tell me your understanding of the severance package that you got? A. My understanding was in return for my	2 3 4 5 6 7 8 9	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes.  Q. Do you also get a pension of any sort from Pharma Medica?
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2 3 4 5 6 7 8 9 10 11 12 13	Q. And in what capacity? A. In terms of a severance. Q. Terms of a severance? A. Uh-huh. Q. Yes? A. Yes. Q. Okay. And tell me your understanding of the severance package that you got? A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary.	2 3 4 5 6 7 8 9 10 11 12 13	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes.  Q. Do you also get a pension of any sort from Pharma Medica?  A. No.  Q. Your only compensation from Pharma Medica that you're getting as of today is the severance
2 3 4 5 6 7 8 9 10 11 12 13 14	Q. And in what capacity? A. In terms of a severance. Q. Terms of a severance? A. Uh-huh. Q. Yes? A. Yes. Q. Okay. And tell me your understanding of the severance package that you got? A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary. Q. Okay. And the close-out activities of the	2 3 4 5 6 7 8 9 10 11 12 13	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes. Q. Do you also get a pension of any sort from Pharma Medica?  A. No. Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?
2 3 4 5 6 7 8 9 10 11 12 13 14 15	Q. And in what capacity?  A. In terms of a severance.  Q. Terms of a severance?  A. Uh-huh.  Q. Yes?  A. Yes.  Q. Okay. And tell me your understanding of the severance package that you got?  A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary.  Q. Okay. And the close-out activities of the site, would that include participate in the defense	2 3 4 5 6 7 8 9 10 11 12 13 14 15	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes. Q. Do you also get a pension of any sort from Pharma Medica?  A. No. Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?  A. Correct.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	Q. And in what capacity? A. In terms of a severance. Q. Terms of a severance? A. Uh-huh. Q. Yes? A. Yes. Q. Okay. And tell me your understanding of the severance package that you got? A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary. Q. Okay. And the close-out activities of the site, would that include participate in the defense of this case?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes.  Q. Do you also get a pension of any sort from Pharma Medica?  A. No.  Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?  A. Correct.  Q. Do you have anything like a retirement,
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	Q. And in what capacity? A. In terms of a severance. Q. Terms of a severance? A. Uh-huh. Q. Yes? A. Yes. Q. Okay. And tell me your understanding of the severance package that you got? A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary. Q. Okay. And the close-out activities of the site, would that include participate in the defense of this case? A. They were not specified. The main things,	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes. Q. Do you also get a pension of any sort from Pharma Medica?  A. No. Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?  A. Correct. Q. Do you have anything like a retirement, IRA, or anything that?
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Q. And in what capacity?  A. In terms of a severance.  Q. Terms of a severance?  A. Uh-huh.  Q. Yes?  A. Yes.  Q. Okay. And tell me your understanding of the severance package that you got?  A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary.  Q. Okay. And the close-out activities of the site, would that include participate in the defense of this case?  A. They were not specified. The main things, as far as close-out of the site, were study	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes. Q. Do you also get a pension of any sort from Pharma Medica?  A. No. Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?  A. Correct. Q. Do you have anything like a retirement, IRA, or anything that?  A. Nothing from Pharma Medica.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	Q. And in what capacity?  A. In terms of a severance.  Q. Terms of a severance?  A. Uh-huh.  Q. Yes?  A. Yes.  Q. Okay. And tell me your understanding of the severance package that you got?  A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary.  Q. Okay. And the close-out activities of the site, would that include participate in the defense of this case?  A. They were not specified. The main things, as far as close-out of the site, were study documents, and study drugs.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes.  Q. Do you also get a pension of any sort from Pharma Medica?  A. No.  Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?  A. Correct.  Q. Do you have anything like a retirement, IRA, or anything that?  A. Nothing from Pharma Medica.  Q. Okay. Are there any companies affiliated
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	Q. And in what capacity?  A. In terms of a severance.  Q. Terms of a severance?  A. Uh-huh.  Q. Yes?  A. Yes.  Q. Okay. And tell me your understanding of the severance package that you got?  A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary.  Q. Okay. And the close-out activities of the site, would that include participate in the defense of this case?  A. They were not specified. The main things, as far as close-out of the site, were study documents, and study drugs.  Q. Okay.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes. Q. Do you also get a pension of any sort from Pharma Medica?  A. No. Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?  A. Correct. Q. Do you have anything like a retirement, IRA, or anything that?  A. Nothing from Pharma Medica. Q. Okay. Are there any companies affiliated with Pharma Medica that have provided a severance, or
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	Q. And in what capacity?  A. In terms of a severance.  Q. Terms of a severance?  A. Uh-huh.  Q. Yes?  A. Yes.  Q. Okay. And tell me your understanding of the severance package that you got?  A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary.  Q. Okay. And the close-out activities of the site, would that include participate in the defense of this case?  A. They were not specified. The main things, as far as close-out of the site, were study documents, and study drugs.  Q. Okay.  A. To get them out of the building.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes. Q. Do you also get a pension of any sort from Pharma Medica?  A. No. Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?  A. Correct. Q. Do you have anything like a retirement, IRA, or anything that?  A. Nothing from Pharma Medica. Q. Okay. Are there any companies affiliated with Pharma Medica that have provided a severance, or retirement, or IRA, or 401(k) package for you?
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q. And in what capacity?  A. In terms of a severance.  Q. Terms of a severance?  A. Uh-huh.  Q. Yes?  A. Yes.  Q. Okay. And tell me your understanding of the severance package that you got?  A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary.  Q. Okay. And the close-out activities of the site, would that include participate in the defense of this case?  A. They were not specified. The main things, as far as close-out of the site, were study documents, and study drugs.  Q. Okay.  A. To get them out of the building.  Q. Okay. Do you have a written severance	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes.  Q. Do you also get a pension of any sort from Pharma Medica?  A. No.  Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?  A. Correct.  Q. Do you have anything like a retirement, IRA, or anything that?  A. Nothing from Pharma Medica.  Q. Okay. Are there any companies affiliated with Pharma Medica that have provided a severance, or retirement, or IRA, or 401(k) package for you?  A. Are you asking about my personal
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2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q. And in what capacity? A. In terms of a severance. Q. Terms of a severance? A. Uh-huh. Q. Yes? A. Yes. Q. Okay. And tell me your understanding of the severance package that you got? A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary. Q. Okay. And the close-out activities of the site, would that include participate in the defense of this case? A. They were not specified. The main things, as far as close-out of the site, were study documents, and study drugs. Q. Okay. A. To get them out of the building. Q. Okay. Do you have a written severance agreement, or a severance contract with Pharma Medica?	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes.  Q. Do you also get a pension of any sort from Pharma Medica?  A. No.  Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?  A. Correct.  Q. Do you have anything like a retirement, IRA, or anything that?  A. Nothing from Pharma Medica.  Q. Okay. Are there any companies affiliated with Pharma Medica that have provided a severance, or retirement, or IRA, or 401(k) package for you?  A. Are you asking about my personal retirement income?  MS. DREW: No.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	Q. And in what capacity? A. In terms of a severance. Q. Terms of a severance? A. Uh-huh. Q. Yes? A. Yes. Q. Okay. And tell me your understanding of the severance package that you got? A. My understanding was in return for my assistance to help with the close-out activities of the site, I would be compensated with six months of salary. Q. Okay. And the close-out activities of the site, would that include participate in the defense of this case? A. They were not specified. The main things, as far as close-out of the site, were study documents, and study drugs. Q. Okay. A. To get them out of the building. Q. Okay. Do you have a written severance agreement, or a severance contract with Pharma	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	I would imagine I would be eligible for rehire. I can't speak to that. I don't know what my file is labeled in Canada.  Q. Okay. So, you have a severance payment that you are receiving from Pharma Medica. You said six months worth of pay?  A. Yes.  Q. Do you also get a pension of any sort from Pharma Medica?  A. No.  Q. Your only compensation from Pharma Medica that you're getting as of today is the severance payment; correct?  A. Correct.  Q. Do you have anything like a retirement, IRA, or anything that?  A. Nothing from Pharma Medica.  Q. Okay. Are there any companies affiliated with Pharma Medica that have provided a severance, or retirement, or IRA, or 401(k) package for you?  A. Are you asking about my personal retirement income?

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1 Q. 2 Pharma Me	(BY MR, WENDLER) If It's affiliated with	1	Q. Okay, And you don't know if there was a
2 Pharma Me	vdlen2		
1	sulvas	2	study monitoring paramedic present during Study 1, or
3 A.	No. No.	3	during Study 2; am I correct?
4 Q.	That's what I'm asking about?	4	A. I've not seen the You know, I don't
5 А,	No.	5	have access to the staffing list of who was there
6 Q.	And the only reason I'm asking is some	6	Q. It's right there in front of you.
7 companies	have shell corporations where they	7	A that day.
8 A.	Not to my knowledge, no.	8	Q. As far as who was there that day? Okay.
9 Q,	That's not the case here? Okay.	8	A. Yeah. So if you're asking me who was in
10	Screening receptionist, what does a	10	the clinic those days, I don't know who was in the
11 screening r	eceptionist do at Pharma Medica?	11	clinic. Is it routine that we had a paramedic there?
12 A.	A screening receptionist? She would, when	12	Yes. We commonly had paramedics, or nurses, or
13 someone	comes in the building, she would confirm who	13	someone who is medically trained who could respond in
14 they were	, verify their ID, confirm why they were	14	an emergency.
15 there. An	d sometimes they would do an I don't	15	Q. Yeah, That's what I'm getting at, Was
16 know that	it's When I say sometimes, we did an	16	there always a paramedic there?
17 Influenza	screen on everyone. Could that be the	17	A. There should be someone who was medically
18 screening	receptionist? It could.	18	trained, whether it's a paramedic paragraph or a
19 Q.	That wouldn't be the person that actually	19	nurse.
20 tested the	blood	20	Q. Who was in charge of making sure the
21 A.	No.	21	Interns and phiebotomists did not reuse needles, if
22 Q.	for the participants screening process?	22	anyone?
23 A.	No.	23	A. When they first were Before they worked
24 Q.	How about a study monitoring paramedic,	24	on the studies, they would do the blood-borne
	133		135
	May Reporting Service	ļ	May Reporting Service
1 what do did		1	pathogen training. They would be trained, typically,
	So, that would be a paramedic who would be	2	by the group leader staff on procedures, how to draw
	rough the State of Missouri who would be	3	blood, how our procedure goes. And then when they
	case anything medical were to happen.	4	were drawing blood, they are responsible for their
	So, is that a requirement at	5	own work. But the group leader was typically there
	Also	6	at the blood draw table watching them draw blood
7 Q.	Sorry.	7	to
8 A.	They would also participate as dosers.	8	Q. That's what I was getting at?
	night does the subjects, as well.	9	A confirm that they were doing it
	Were they required to be there by	10	appropriately.
•	, or by law, or do you know?	11	Q. During the blood draw times
	I don't know if it's a law. But when we	12	A. Uh-huh.
-	subjects, we want to make sure that	13	Q. — who did you say was monitoring?
•	fe. And having medically-trained personnel	14	A. Typically, the group leader. Commonly
	I times is important.	15	there would be a quality control person there, as
	Were there any study monitoring paramedics	16	well. Sometimes a study coordinator.
	g Study 1 or Study 2?	17	Q. You said typically. Was there always
	I don't have the staff list in front of	18	someone there monitoring, and watching the
	ild think that there would have been, yes.	19	phiebotomists, and the interns during the blood draw
	Well, Caleb Conklin, C-O-N-K-L-I-N, a was	20	process?
21 one.		21	A. I would say the majority of the time, yes.
	Caleb is a paramedic, yes.	22	Q. Okay. And when you say majority, that
	Was he there during Study 1 or Study 2?	23	could be 51 percent. What percent
24 A.	I don't recall.	24	A. I wasn't there for every blood draw. Can
	134		136
	May Reporting Service	<u> </u>	May Reporting Service

<b></b>			
1	I say that someone was always there? Someone	1	MS, DREW: You can answer as to
2	Typically, the practice is, yes, there should be a	2	those.
3	supervisor there at the table monitoring the blood	3	MR, WENDLER: No. No. No. I'm not
4	draws to make sure they're done appropriately.	4	limiting it to those.
5	Q. Okay.	5	MS. DREW: Yeah, you are.
6	A. So, that was the common practice that was	6	MR. WENDLER: No, I'm not. That's
7	done.	7	not my question. That's your question.
8	Q. Okay. But back to the question: Do you	8	Q, (BY MR, WENDLER) My question is: Do you
9	know what percentage of the time there was actually	9	have any crimes?
10	someone there	10	MS. DREW: And I'm saying, by law,
11	A. I couldn't guess.	11	she doesn't have to reveal
12	Q. — other than there should've been?	12	MR. WENDLER: This is discovery.
13	<ul> <li>A. I couldn't guest a percentage of the time.</li> </ul>	13	MS. DREW: parking tickets.
14	Q. Okay. Okay. Do you have any Let's	14	MR. WENDLER: This is discovery.
15	see. Any negative marks against your medical license	15	MS. DREW: Right.
16	from any medical or nursing association from any	16	MR. WENDLER: How do I know If she
17	state?	17	knows what's a felony?
18	A. No.	18	Q. (BY MR. WENDLER) Just answer the
19	Q. And you said you've been sued a couple	19	question, please. If the answer is none, it's
20	times before?	20	simple.
21	A. Correct.	21	A. I believe I've had a speeding ticket years
22	Q. Do you remember the name's of the	22	ago.
23	Plaintlffs?	23	Q. Okay. Anything else?
24	A. The first one was long ago enough I don't	24	A. No.
	137		139
	May Reporting Service		May Reporting Service
1	recall.	1	Q. And the speeding ticket was in Missouri?
2	Q. Where was that?	2	A. Yes.
3	A. It was in Hazelwood.	3	Q. Okay. Since this case may go to trial
4	Q. Okay, And the second one?	4	here in the St. Louis area, do you have any relatives
5	A. The second one, Melanie Tate Sacarro.	5	with the last name other than Jordan?
6	Q. Where was that one?	6	A. My maiden name is Maddex, M-A-D-D-E-X.
7	A. That was in Kansas City.	7	Q. Any others, including in-laws, cousins
8	Q. Z-A-C-A-R-R-O?	8	Inch?
9	A. S-A-C-A-R-R-O, I believe.	9	A. My In-laws' last name is Jordan. Of my
10	Q. In Kansas City?	10	immediate family, I have My mom has a cousin who
11	A. Yes.	11	lives in St. Peters, but I don't have other immediate
12	Q. All right. And I'm sometimes embarrassed	12	family, besides my parents, in the St. Louis area.
13	to ask this question, but I have to. Do you have any	13	Q. Okay. The cousin in St. Peters?
14	criminal record to your credit where you've pled	14	A. That last Ewalt, E-W-A-L-T.
15	guilty, or been found gullty of a crime?	15	Q. And since your practice is in St. Charles,
16	A. No.	16	you probably have a pretty wide range of patients in
17	Q. Including anything from a parking ticket	17	this area. Have you ever practiced anywhere, other
18	to a multiple homicide?	18	than in St. Charles?
19	MS. DREW: Object to the form.	19	A. So, I've practiced in Hazelwood, Missouri.
20	Q. (BY MR, WENDLER) Anything,	20	Q. By yourself?
21	MS. DREW: Object to the form of the	21	A. With Mercy Medical Group.
22	question. It's an improper question. Felony or	22	Q. Okay. And you were in Kansas City for a
23	misdemeanors that go to the Issue of honesty.	23	while; right?
24	Q. (BY MR. WENDLER) Go ahead.	24	A. Yes.
	138		140
	May Reporting Service	<u>L</u> .	May Reporting Service

1	Q. I don't need to ask about that. All	1	* * * * * *
2	right. I think I am just about done here. But is	2	[Witness excused.]
3	there anything else about this case, Dr. Jordan, that	3	
4	you think is important that we have not discussed?	4	
5	A. I don't think so. I think we've talked	б	
6	about a lot.	6	
7	Q. Okay.	7	
8	MR. WENDLER: Just one second.	8	
9	(Whereupon, an off the	9	
10	record discussion was	10	
11	held, which by direction	11	
12	was not stenographically	12	
13	reported.)	13	
14	Q, (BY MR, WENDLER) At Anderson Hospital,	14	
15	Dr. Jordan, do you know if Louis spoke to anyone at	15	
16	the hospital, either through hearing him speak, or	16	
17	him telling you he spoke to someone?	17	
18	A. He didn't I don't recall that he told	18	
19	me that he spoke to anyone. And when we were at	19	
20	Anderson Hospital, I was in the room with	20	
21	Mr. Wallace, and so I don't know what Louis was	21	
22	doing.	22	
23	Q. But you rode road back from Maryville,	23	
24	Illinois to St. Charles with him; correct?	24	
	141		143
	May Reporting Service		May Reporting Service
1	A. Uh∽huh.	1	COMES NOW THE WITNESS, HEATHER JORDAN,
2	Q. Yes?	2	M.D., and having read the foregoing transcript of the
	Q. Yes? A, Yes.	2 3	M.D., and having read the foregoing transcript of the deposition taken on the 30th day of July, A.D., 2019,
2	•		•
2	A, Yes.	3	deposition taken on the 30th day of July, A.D., 2019,
2 3 4	A, Yes. Q. Did he say anything about any	3 4	deposition taken on the 30th day of July, A.D., 2019, acknowledges by signature hereto that it is a true
2 3 4 5	A. Yes. Q. Did he say anything about any conversations he had when you were	3 4 5	deposition taken on the 30th day of July, A.D., 2019, acknowledges by signature hereto that it is a true and accurate transcript of the testimony given on the
2 3 4 5 6	A. Yes. Q. Did he say anything about any conversations he had when you were A. I don't recall.	3 4 5 6	deposition taken on the 30th day of July, A.D., 2019, acknowledges by signature hereto that it is a true and accurate transcript of the testimony given on the
2 3 4 5 6 7	A. Yes. Q. Did he say anything about any conversations he had when you were A. I don't recall. Q en route back to St. Charles? You	3 4 5 6 7	deposition taken on the 30th day of July, A.D., 2019, acknowledges by signature hereto that it is a true and accurate transcript of the testimony given on the
2 3 4 5 6 7 8	A. Yes. Q. Did he say anything about any conversations he had when you were A. I don't recall. Q en route back to St. Charles? You don't recall.	3 4 5 6 7 8	deposition taken on the 30th day of July, A.D., 2019, acknowledges by signature hereto that it is a true and accurate transcript of the testimony given on the
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	··· · · · · · · · · · · · · · · · · ·	т	
1	I, Kimberly A. Harris, Certified Shorthand	1	not to answer unless you're claiming a privilege.
2	Reporter and Notary Public of the County of Madison,	2	MS, DREW: You're asking for expert
3	State of Illinois, do hereby certify that HEATHER	3	testimony,
4	JORDAN, M.D. came before me on the 30th day of July,	4	MR. WENDLER: Again, unless you're
5	A.D., 2019, at the offices of Hinshaw & Culbertson	6	cialming privilege, you cannot instruct her not to
6	LLp, 701 Market Street, Sulte 1375, St. Louis,	6	answer the question. That's the rules.
7	Missouri, 63101, and swore before me to testify to	7	Q. (BY MR. WENDLER) So, go ahead and read
8	the truth, the whole truth, and nothing but the truth	8	through the narrative section, and tell me if you
9	regarding her knowledge touching upon the matter in	9	disagree with anything that that expert wrote?
10	controversy.	10	A. I would say I have not reviewed any of the
11	I do further certify that I did take	11	documents that he's listed.
12	stenographic notes of the questions propounded to	12	Q. And that's I understand that, I'm not
13	said witness and her answers thereto and that said	13	suggesting that you have.
14	notes were afterwards transcribed by computer-aided	14	A. I can read the narrative, but I feel like
15	transcription under my direction and supervision. I	15	I'm at a disadvantage when I have not reviewed any of
16	do further certify that the attached and foregoing is	16	the background
17	a true, correct, and complete copy of my notes and	17	MS, DREW: Doctor
18	that said testimony is now herewith returned.	18	A. •• that he has,
19	Dated this 10th of September, A.D., 2019,	19	MS, DREW: Doctor, If you can't
20	and given under my hand and seal.	20	comment, one way or the other, that's a perfectly
21	• • • • • • • • • • • • • • • • • • •	21	appropriate answer.
22		22	A. Okay,
23	Pr. T. M. T.	23	MS. DREW: You don't have to give an
24	KIMBERLY A. HARRIS, CSR	24	answer, and say what you agree or disagree with since
- '	146		147
ļ	May Reporting Service		May Reporting Service
1		1	you've already established in direct testimony that
Ι.			you ve an out, dotted and in the act to be in the
2	COURT REPORTER'S CERTIFICATION OF CERTIFIED OUESTIONS	12	you're not an expert in Henatitis C.
2	COURT REPORTER'S CERTIFICATION OF CERTIFIED QUESTIONS	2 3	you're not an expert in Hepatitis C.  A. I am not an expert. And he's had 27 items
3		3	A. I am not an expert. And he's had 27 Items
3 4	I, Kimberly A. Harris, Certified Shorthand	3 4	A. I am not an expert. And he's had 27 items of review that I've not reviewed.
3 4 5	I, Kimberly A. Harris, Certified Shorthand Reporter, do hereby certify that the following	3 4 5	A. I am not an expert. And he's had 27 items of review that I've not reviewed.  Q. (BY MR, WENDLER) Okay. And I I am not
3 4 5 6	I, Kimberly A. Harris, Certified Shorthand Reporter, do hereby certify that the following questions appearing on said pages were asked as shown	3 4 5 6	A. I am not an expert. And he's had 27 items of review that I've not reviewed.  Q. (BY MR. WENDLER) Okay. And I I am not suggesting that you have reviewed it. I just want to
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3 4 5 6 7 8 9	I, Kimberly A. Harris, Certified Shorthand Reporter, do hereby certify that the following questions appearing on said pages were asked as shown in my stenographic notes. I further certify that said questions in the following proceedings is true and correct.	3 4 5 6 7 8 9	A. I am not an expert. And he's had 27 items of review that I've not reviewed.  Q. (BY MR, WENDLER) Okay. And I I am not suggesting that you have reviewed it. I just want to know if there is anything in the expert's report that he says that you say, 'I know that's wrong.'  MS. DREW: Objection.  Q. (BY MR. WENDLER) Without reading the
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3 4 5 6 7 8 9 10 11 12 13	I, Kimberly A. Harris, Certified Shorthand Reporter, do hereby certify that the following questions appearing on said pages were asked as shown in my stenographic notes. I further certify that said questions in the following proceedings is true and correct.  *******  PAGE 115 LINE 10  Q. (BY MR. WENDLER) And I would like you to read through that, and tell me what parts, if	3 4 5 6 7 8 9 10 11 12 13	A. I am not an expert. And he's had 27 items of review that I've not reviewed.  Q. (BY MR, WENDLER) Okay. And I I am not suggesting that you have reviewed it. I just want to know if there is anything in the expert's report that he says that you say, 'I know that's wrong.'  MS. DREW: Objection.  Q. (BY MR. WENDLER) Without reading the records, without reviewing anything  MS. DREW: Object to the form of the question.  Q. (BY MR, WENDLER) If you can tell me
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the narrative section.  A. Well, when I look at this, "Mr. Wallace screened at Spoulding Medical on May 18 and 22nd." I don't know that to be true. Is it Incorrect? II don't know that to be true. Is it Incorrect? II don't know that the incorrect, but I don't know that the incorrect. Put linformation to know that that's true.  G. And that's what I'm getting at. If there Is something in here that you know is knowned. I'm not asking you that you agree with everything else. I'm just saying, read this, and tell me if there is something in here that you know is knowned. Not a meessarily that you agree with everything else he wrote?  MS. DREW: Well A. Well, I don't know that he screened at Spaulding so I can't say that that I know to be t true. I don't know that to be true. MS. DREW: I'm going to object to this. G. (BY MR. WENDLER) Again, therefore, you cannot say it's incorrect or correct? And I don't care about that. What I want to know is if there is something that he wrote that you say. T know that is incorract. Tell me whiat it is? G. (BY MR. WENDLER) Again, therefore, you cannot say it's incorrect or correct? And I don't care about that. What I want to know is if there is something that he wrote that you say. T know that is incorract. Tell me whiat it is? G. (BY MR. WENDLER) Again, therefore, you cannot say it's incorrect or correct? The ingoing to object to d. A. I'm going to object to d. Will be certified. And that would include all the givelence or correct? And I don't care about that. What I want to know is if there is judge. Certify the question. Tim going to instruct her care about that. What I want to know is if there is judge. Certify the question. Go for it.  G. Okay. And therefore, not answer the gives to answer that question? A. Ym going to follow my — the advice of my the cruse to answer this question? A. Yes, I will not answer the question. MR. WENDLER: Own the it's answer. MR. WENDLER: Own the it's answer. MR. WENDLER: Own they it's answer. MR. WENDLER: Own they all of interport answer these	8	of detail that I can't specifically	8	Hepatitis, and asking her to speculate in a field
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screened at Spaulding Medical on May 18 and 22nd." I don't know that to be true. Is it incorrect? I don't know that to be true. Is it incorrect? I don't know that to be true. Is it incorrect? I don't know that to be true. Is it incorrect? I don't know that to be true. Is it incorrect. I'm life information to know that that's true.  G. And that's what I'm getting at. If there is something in here that you know is incorrect, I'm not asking you that you agree with everything else. I'm just saying, read this, and tell me if there is something in here that you know is incorrect. Not necessarily that you agree with everything else he worker  MK, DREW: Well A. Well, I don't know that he screened at this.  Spaulding so I can't say that that I know to be true. I don't know that to be true. MK, DREW: I'm going to object to this.  G. (BY MR. WENDLER) Again, therefore, you cannot say it's incorrect or correct? And I don't care about that. What I want to know is if there is something that he wrote that you say, 'I know that is incorrect.' Tell me what it its' MS. DREW: You know what? I'm going to object to the question. Tim going to instruct her ot object to the question. Tim going to instruct her ot oloject to the question. Tim going to instruct her ot object to the question. Tim going to instruct her ot object to the question. A. Yes, I'ml not answer the question?  A. Yes, I'ml not answer the question.  A. Yes, I'ml not answer the question.  MR. WENDLER: Grey. The question.  MR. WENDLER: Grey. The question.  MR. WENDLER: But anyway, back to the question?  A. Yes, I'ml not answer the question.  MR. WENDLER: But anyway, back to the question?  A. Yes, I'ml not answer the question.  MR. WENDLER: But anyway, back to the question?  A. Yes, I'ml not answer the question.  MR. WENDLER: But anyway, back to the question?  A. Yes, I'ml not answer the question.  MR. WENDLER: But anyway, back to the question?  A. Yes, I'ml not answer the question.  MR. WENDLER: But anyway, back to the question?  A. Yes, I'ml not answer the quest	10	the narrative section.	10	Improper question. It's asking for expert testimony.
don't know that to be true. Is it incorrect? I 14 don't know that it's incorrect, but I don't have 16 don't know that it's incorrect, but I don't have 16 don't know that it's incorrect, but I don't know that it's incorrect, but I don't know is incorrect, I'm 18 something in here that you know is incorrect. Not 20 something in here that you know is incorrect. Not 21 necessarily that you agree with everything else he 22 wrote?  23 MS. DREW: Well 24 A. Well, I don't know that he screened at 24 here is 3 MS. DREW: Well 45 May Reporting Service 149 here is 40 don't know that to be true. I don't know that to way it's incorrect? And I don't care about that. What I want to know is if there is 40 most part in the one 40 don't want to answer. And you can take it up with the 19 judge. Certify the question. Tim going to follow my the advice of my attorney. 46 and is answer based on the advice of 46 A. I m not going to answer based on the advice of 46 A. I m not going to answer based on the advice of 46 A. I m not going to answer based on the advice of 46 A. I m not going to interest in a divice of my attorney. 46 A. I me not going to answer these question in the judge, and the judge says you have to come back here and answer these questions, and 4 here to do that, you're willing to take that risk?  MS. DREW: Brian, I am the one 4 that's willing to take that risk?  MS. DREW: Brian, I am the one 4 that's willing to take that risk?  MS. DREW: She is my client, You do 4 not take to here that I don't know what? I'm going to anything the fore fore, you and that two the want is marked to answer. She is a former employee. If you want to answer. And you can take it up with the 19 judge. Certify the question. Go for it. 19 judge. Cert	11	A. Well, when I look at this, "Mr. Wallace	11	And I'm going to instruct her not to answer.
14 don't know that it's incorrect, but I don't have 15 information to know that that's true. 16 Q. — Ms. Drew? 17 is something in here that you know is incorrect, I'm 18 not asking you that you agree with everything else. 19 I'm just saying, read this, and tell me if there is 20 something in here that you know is incorrect. Not 21 necessarily that you agree with everything else he 22 wrote? 23 Ms. DREW: Well — 24 A. Well, I don't know that he screened at 25 Ms. DREW: Well — 26 May Reporting Service 27 Ms. DREW: Brian, I am the one 28 true, I don't know that to be true. 29 The cannot say it's incorrect or correct? And I don't care about that. What I want to know is if there is 29 incorrect. Tell me what it is? 20 Ms. DREW: You know what? I'm going to object to the question. 20 Ms. DREW: You know what? I'm going to object to refuse to answer his question. 21 Judge. Certify the question. Go for it. 22 A. Yes, I will not answer the question. 23 Ms. DREW: Well, — 24 A. Well, I don't know that he screened at that. What I want to know is if there is 25 something in here that you know is incorrect. Not to come back here and answer thas questions, and maybe pay my attorney's fees for having to come back here and answer thas questions, and maybe pay my attorney's fees for having to come back here to do that, you're willing to take that risk.  16 May Reporting Service  18 Ms. WENDLER: I'm not talking to you. I'm talking to wou. I'm talking to her. 29 you. I'm talking to her. 30 Ms. DREW: She is my client, You do not talk to her. You talk to her through me I am representing her. She is a former employee. If you want to violate ethical rules, go ahead and talk to my client directly.  19 Is when I ask her a question, I don't want an answer from you. You can object all you want. I want answers from her, or you tell me she's not going to answer and you can take it up with the samewer about who's going to take care of any attorney.  20 A. Yes, I'will not answer the question.  21 Ms. WENDLER: I'm not talking to wou can dark it u	12	screened at Spaulding Medical on May 18 and 22nd." I	12	Q. (BY MR. WENDLER) Are you again not going
15 Information to know that that's true. 16 Q. And that's what I'm getting at. If there 17 is something in here that you know is incorrect, I'm 18 not asking you that you agree with everything else. 19 I'm just saying, read this, and tell me if there is 20 something in here that you agree with everything else. 21 necessarily that you agree with everything else he 22 wrote? 23 MS. DREW: Well 24 A. Well, I don't know that he screened at 25 may Reporting Service 26 May Reporting Service 27 MS. DREW: Well 28 MS. DREW: I'm going to object to 29 true, I don't know that to be true. 20 (BY MR. WENDLER) Again, therefore, you cannot say it's incorrect or correct? And I don't care about that. What I want to know is if there is 29 incorrect. Tell me what it is? 20 MS. DREW: The going to object to 21 to object to the question. I'm going to instruct her it to object to the question. I'm going to instruct her it to object to not to answer. And you can take it up with the capacity as a former employee of Pharma Medica. 20 C. Okay. And therefore, not answer the question. 21 MR. WENDLER: Cap. The question. 22 Will be certified. And that would include all the questions relative to the narrative section of Dr. 24 Hull's report. 25 If you want to voice the sarrative section of Dr. 26 MS. DREW: Sto doesn't have to haspyrea, back to the question, and maybe pay my attorney's fees for having to come back here and answer based on the advice of my and the judge, and the judge says you have to come back here and answer thas question, and maybe pay my attorney's fees for having to come back here and answer thas dues dues that risk?  22 MS. DREW: Well 23 MS. DREW: Brian, I am the one 24 that's willing to take that risk.  25 MS. DREW: Brian, I am the one 26 that's willing to take that risk.  26 MR. WENDLER: I'm not talking to you. I'm talking to her.  27 MS. DREW: She is my client. You do that's willing to take that risk.  28 MS. DREW: She is my client. You do that's willing to take that risk.  29 MR. WENDLER: Town that would incliv	13	don't know that to be true. Is it incorrect? I	13	to answer the question based on the advice of
16 Q. And that's what I'm getting at. If there 17 Is something in here that you know is incorrect. I'm 18 not asking you that you agree with everything else. 19 I'm just saying, read this, and tell me if there is 20 something in here that you know is incorrect. Not 21 necessarilly that you agree with everything else he 22 wrote? 23 MS. DREW: Well 24 A. Well, I don't know that he screened at 25 May Reporting Service 26 If Spaulding so I can't say that that I know to be 27 true. I don't know that to be true. 28 MS. DREW: I'm going to object to 29 true. I don't know that to be true. 3 MS. DREW: I'm going to object to 4 this. 5 Q. (BY MR. WENDLER) Again, therefore, you 6 cannot say it's incorrect or correct? And I don't 7 care about that. What I want to know is if there is 8 something in here that you know what? I'm going 9 incorrect. Tell ime what it is? 9 incorrect. Tell ime what it is? 10 MS. DREW: You know what? I'm going 10 to answer. And you can take it up with the 11 to object to the question. I'm going to instruct her 12 anot to answer. And you can take it up with the 13 judge. Certify the question? 14 Q. (BY MR. WENDLER) Well, are you going to 15 A. I'm going to follow my the advice of my 16 A. I'm going to follow my the advice of my 17 attorney. 18 Q. Okay. And therefore, not answer the question. 19 MR. WENDLER: I'm took take that risk? 19 MS. DREW: She is my client. You do 10 not talk to her. You talk to her through me. I am 11 representing her. She is a former employee. If you 12 want to violate ethical rules, go ahead and talk to 13 may be pay my attorney's fees for having to come back 14 here to do that, you're willing to take that risk? 15 MS. DREW: She in the fiving to take that risk? 16 MR. WENDLER: Tim not talking to 27 you. I'm talking to her. 28 want to violate ethical rules, go ahead and talk to 29 you lent directly. 29 is when I ask her a question, I don't want an enswer 29 is when I ask her a question, I don't want an enswer 29 is when I ask her a question, I don't want an enswer	14	don't know that it's incorrect, but I don't have	14	A. Correct.
17 Is something in here that you know is incorrect, I'm 18 not asking you that you agree with everything else. 19 I'm just saying, read this, and tell me if there is 20 something in here that you know is incorrect. Not 21 necessarily that you agree with everything else he 22 wrote? 23 MS. DREW: Well 24 A. Weil, I don't know that he screened at 25 MS. DREW: Brian, I am the one 26 true. I don't know that to be true. 27 MS. DREW: I'm going to object to 28 true. I don't know that to be true. 39 MS. DREW: I'm going to object to 4 this. 5 Q. (BY MR. WENDLER) Again, therefore, you 6 cannot say it's incorrect or correct? And I don't 6 carnot say it's incorrect or correct? And I don't 6 care about that. What I want to know is if there is 8 something that he wrote that you say, 'I know that is 9 incorrect.' Tell me what it is? 10 MS. DREW: You know what? I'm going 11 to object to the question. I'm going to instruct her 12 not to answer. And you can take it up with the 13 judge. Certify the question. Go for it. 14 Q. (BY MR. WENDLER) Weil, are you going to 15 refuse to answer this question? 16 A. I'm going to follow my the advice of my 16 Q. Okay. And therefore, not answer the 17 question? 18 Q. Okay. And therefore, not answer the 18 question? 20 A. Yes, I will not answer the question. 21 MR. WENDLER: Okay. The questions 22 will be certified. And that would include all the 23 questions relative to the narrative section of Dr. 24 Hull's report. 25 A. Weil, I don't know that is know to be 26 true. I don't know that to be true. 27 MS. DREW: Brian, I am the one 28 that's willing to take that risk. 29 MS. DREW: Brian, I am the one 20 MR. WENDLER: I'm not talking to 21 you. I'm talking to her. 22 you. I'm talking to her. 33 MS. DREW: She is a former employee. If you want to violate ethical rules, go ahead and talk to 35 my client directly. 36 want to violate ethical rules, go ahead and talk to 36 my talking to take that risk. 39 incorrect. Tell i'm seyling 30 is when I ask her a question, I don't want an answer 31 from yo	15	information to know that that's true.	15	Q Ms. Drew?
18 not asking you that you agree with everything else. 19 I'm just saying, read this, and tell me if there is 20 something in here that you know is incorrect. Not 21 necessarily that you agree with everything else he 22 wrote? 23 MS. DREW: Well 24 A. Well, I don't know that he screened at 25 May Raporling Service 26 I Spaulding so I can't say that that I know to be 27 true, I don't know that to be true. 28 MS. DREW: I'm going to object to 3 MS. DREW: I'm going to object to 4 this. 5 Q. (BY MR. WENDLER) Again, therefore, you 5 cannot say it's incorrect or correct? And I don't 6 cannot say it's incorrect or correct? And I don't 7 care about that. What I want to know is if there is 8 something that he wrote that you say, 'I know that is 9 incorrect.' Tell me what it is? 10 MS. DREW: You know what? I'm going to object to the question. I'm going to instruct her 10 not to answer. And you can take it up with the 11 giudge. Certify the question? 12 A. I'm going to follow my the advice of my 13 maybe pay my attorney's fees for having to come back here and answer these question. A I'm going to object to 14 MR. WENDLER: Brian, I am the one 15 that's willing to take that risk? 16 Ms. PREW: Brian, I am the one 16 that's willing to take that risk? 17 Ms. DREW: Brian, I am the one 18 Ms. PREW: Brian, I am the one 19 Ms. WENDLER: I'm not talking to 20 vou. I'm talking to her. 21 Ms. DREW: Brian, I am the one 22 will be care to do that, you're willing to take that risk. 23 Ms. DREW: Brian, I am the one 24 that's willing to take that risk. 24 that's willing to take that risk. 25 Ms. DREW: Brian, I am the one 26 that's willing to take that risk. 27 Ms. DREW: Brian, I am the one 28 that's willing to take that risk. 29 Ms. DREW: Brian, I am the one 29 Ms. WENDLER: I'm not talking to 20 vou. I'm talking to her. 21 on talk to her. You talk to her through me. I am 25 representing her. She is a former employee. If you and talk it to her through me. I am 26 or talk to her. You talk to her through me. I am 27 or talk to her. Yo	16	Q. And that's what I'm getting at. If there	16	A. I am not going to answer based on the
19 I'm just saying, read this, and tell me if there is 20 something in here that you know is incorrect. Not 21 necessarily that you agree with everything else he 22 wrote? 23 MS, DREW: Well 24 A. Well, I don't know that he screened at 24 here to do that, you're willing to take that risk? 25 MS, DREW: Well 26 MS, DREW: Well 27 MS, DREW: Well 28 MS, DREW: Well 29 May Reporting Service 20 May Reporting Service 21 Spaulding so I can't say that that I know to be 2 true. I don't know that to be true. 3 MS, DREW: I'm going to object to 4 this. 29 MS, DREW: I'm going to object to 4 this. 20 (BY MR. WENDLER) Again, therefore, you 5 representing that he wrote that you say, I' know that is 9 incorrect. Tell me what it is? 30 MS, DREW: You know what? I'm going to object to 4 this. MR, WENDLER: Ten, all I'm saying 1 is when I ask her a question, I don't want an answer 10 MS, DREW: She is a former employee. If you want. I want to know is if there is 8 something that he wrote that you say, I' know that is 9 incorrect. Tell me what it is? 31 Judge. Certify the question. Go for it. 4 C. (BY MR. WENDLER) Well, are you going to refuse to answer. And you can take it up with the 10 question? 32 A. Yes, I will not answer the question. MR. WENDLER: Clay. The question will be certified. And that would include all the 4 Questions relative to the narrative section of Dr. MR. WENDLER: Clay. The questions will be certified. And that would include all the 4 questions relative to the narrative section of Dr. MR. WENDLER: Clay. The questions will be certified. And that would include all the 4 questions relative to the narrative section of Dr. MR. WENDLER: Clay. The questions will be certified. And that would include all the 4 questions relative to the narrative section of Dr. MR. WENDLER: Clay. The questions will be certified. And that would include all the 4 questions relative to the narrative section of Dr. MR. WENDLER: Clay. The questions will be certified. And that would include all the 4 questions relative to the narr	17	is something in here that you know is incorrect, I'm	17	advice of my attorney.
20 something in here that you know is incorrect. Not 21 necessarily that you agree with everything else he 22 wrote? 23 MS. DREW: Well 24 A. Well, I don't know that he screened at 25 Msy Reporting Service  1 Spaulding so I can't say that — that I know to be 2 true. I don't know that to be true. 3 MS. DREW: I'm going to object to 4 this. 5 Q. (BY MR. WENDLER) Again, therefore, you 6 cannot say it's incorrect or correct? And I don't 7 care about that. What I want to know is if there is 8 something in here that you say, 'I know that is 9 incorrect.' Tell me what it is?  10 MS. DREW: You know what? I'm going 11 to object to the question. Tim going to instruct her 12 not to answer. And you can take it up with the 13 judge. Certify the question?  14 Q. (BY MR. WENDLER) Well, are you going to 15 refuse to answer this question?  16 A. I'm going to follow my — the advice of my 17 attorney.  18 Q. Okay. And therefore, not answer the 19 question?  10 MR. WENDLER: I don't know what?  11 don't want an answer from her, or you tell me she's not going to answer. And you can take it up with the 19 question?  10 MR. WENDLER: I don't want an answer from you. You can object all you want. I want 11 to object to the question for it. 12 maswer, and you know that to answer about who's going to take care of any 15 refuse to answer this question?  16 A. I'm going to follow my — the advice of my 16 according to the follow my — the advice of my 17 attorney.  18 Q. Okay. And therefore, not answer the 19 question?  20 A. Yes, I will not answer the question.  21 MR. WENDLER: I don't know where 22 well be certified, And that would include all the 23 questions relative to the nerrative section of Dr.  24 Will be certified, And that would include all the 25 questions relative to the nerrative section of Dr.  26 to come back here to do tak, you're well back that risk?  27 MS. DREW: Brian, I am the one 28 that's willing to take that risk.  29 MR. WENDLER: I'm not talking to 20 want to violate thical rules, go ahead and talk to 21 mot talk to h	18	not asking you that you agree with everything else.	18	Q. Okay. And just so we're clear, If I take
21 necessarily that you agree with everything else he wrote? 22 wrote? 23 MS. DREW: Well 24 A. Well, I don't know that he screened at 25 May Reporting Service 26 May Reporting Service 27 MS. DREW: Brian, I am the one 28 Ms. DREW: Brian, I am the one 29 May Reporting Service 29 Ms. DREW: Brian, I am the one 29 Ms. DREW: Brian, I am the one 20 Ms. DREW: I'm going to object to 30 Ms. DREW: I'm going to object to 41 this. 42 Ms. DREW: I'm going to object to 43 this. 54 Q. (BY MR. WENDLER) Again, therefore, you 64 cannot say it's incorrect or correct? And I don't 75 care about that. What I want to know is if there is 85 something that he wrote that you say, I'know that is 86 incorrect.' Tell me what it is? 87 MS. DREW: She is my client. You do 47 not talk to her. You talk to her through me. I am 48 representing her. She is former employee. If you 49 want to violate ethical rules, go ahead and talk to 40 mot talk to her. You talk to her through me. I am 40 representing her. She is former employee. If you 40 want to violate ethical rules, go ahead and talk to 40 mot talk to her. You talk to her through me. I am 41 representing her. She is former employee. If you 41 want to violate ethical rules, go ahead and talk to 42 mswer sfrom her, or you tell me she's not going to 43 mswer. 44 ms. WENDLER: Teri, all I'm saying 45 is when I ask her a question, I don't want an answer 46 mswers from her, or you tell me she's not going to 47 answer. 48 ms. DREW: She losen't have to 49 answers from her, or you tell me she's not going to 40 answer. 40 answer about who's going to take care of any 41 attorney. 41 answer about who's going to take care of any 41 attorney's fees for having to take that risk. 42 that's willing to take that risk. 44 that's willing to take that risk. 45 ms. DREW: Brian, I am the one 45 mst. This lating to take that risk. 46 ms. Ms. DREW: She losen trails. 47 ms. DREW: She losen talk to to pour in talk to mot talk to her. 48 ms. DREW: She losen't have to 49 answers from her, or you tell me she's not going to	19	I'm just saying, read this, and tell me if there is	19	this up with the judge, and the judge says you have
22 wrote? 23 MS, DREW: Well 24 A. Well, I don't know that he screened at  149  May Reporting Service  1 Spaulding so I can't say that that I know to be 2 true, I don't know that to be true, 3 MS, DREW: I'm going to object to 4 this. 5 Q. (BY MR. WENDLER) Again, therefore, you 6 cannot say it's incorrect or correct? And I don't 7 care about that. What I want to know is if there is 8 something that he wrote that you say, 'I know that's 9 incorrect.' Tell me what it is? 10 MS, DREW: You know what? I'm going to object to 11 to object to the question. I'm going to instruct her 12 not to answer, And you can take it up with the 13 judge. Certify the question. Go for it. 14 Q. (BY MR. WENDLER) Well, are you going to 15 refuse to answer this question? 16 A. I'm going to follow my the advice of my 17 attorney. 18 Q. Okay. And therefore, not answer the 19 question? 20 A. Yes, I will not answer the question. 21 MS, DREW: She is my client, You do 4 not talk to her. You talk to her through me. I am 7 representing her. She is a former employee. If you 8 ant to violate ethical rules, go ahead and talk to 9 is when I ask her a question, I don't want an answer 10 from you. You can object all you want. I want 11 answers from her, or you tell me she's not going to 12 answer. 13 Judge. Certify the question. Go for it. 14 Q. (BY MR. WENDLER) Well, are you going to 15 refuse to answer this question? 16 A. I'm going to follow my the advice of my 17 attorney. 18 Q. Okay. And therefore, not answer the 19 question? 20 A. Yes, I will not answer the question. 21 MR. WENDLER: Okay. The questions 22 will be certified. And that would include all the 23 questions relative to the narrative section of Dr. 24 Hull's report. 25 here to do that, you're even coming from on this because there's a lot of inappropriateness going on here, but it's not from my end. 26 mot talk to her. You talk to her through me. I am 27 representing her. She is a former employee. If you and talk to 28 mot talk to her. You talk to her. You talk to her. You don	20	something in here that you know is incorrect. Not	20	to come back here and answer these questions, and
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14 Q. (BY MR. WENDLER) Well, are you going to 15 refuse to answer this question? 16 A. I'm going to follow my the advice of my 17 attorney. 18 Q. Okay. And therefore, not answer the 19 question? 19 MR. WENDLER: Okay. The questions 20 A. Yes, I will not answer the question. 21 MR. WENDLER: Okay. The questions 22 will be certified. And that would include all the 23 questions relative to the narrative section of Dr. 24 Hull's report. 15 attorney's fees. She's being represented through her 26 capacity as a former employee of Pharma Medica. 27 Trying to infer that she personally is responsible 28 for fees is inappropriate, and you know that. 29 you're even coming from on this because there's a lot of inappropriateness going on here, but it's not from my end. 20 Q. (BY MR. WENDLER) But anyway, back to the report, Hepatitis C section, ma'am, you're not going 29 Total Company of take care of any attorney's fees. She's being represented through her capacity as a former employee of Pharma Medica. 29 Trying to infer that she personally is responsible for fees is inappropriate, and you know that. 29 you're even coming from on this because there's a lot of inappropriateness going on here, but it's not from my end. 20 Q. (BY MR. WENDLER) But anyway, back to the report, Hepatitis C section, ma'am, you're not going	12	not to answer. And you can take It up with the	1	answer.
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24 Hull's report.  24 report, Hepatitis C section, ma'am, you're not going 150 152			1	•
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		Τ ,	<b>.</b>		
1	to answer any questions about whether you disagree	1	Α.	Yeah.	
2	with that; am I correct?	2	Q,	Ms. Drew?	•
3	A. Correct.	3	A.	Yes.	
4	Q. And you're not going to tell me if the	4	Q.	Okay.	
5	statement, Hepatitis C is a disease of the liver	6		* * * * * * *	
6	caused by the Hepatitis C virus? You won't tell me	6			
7	If you agree or disagree with that?	7			
8	MS. DREW: I instruct the witness	8			
9	not to answer.	9			
10	MR. WENDLER: Okay. Certify that	10			
11	entire section of questions on the Hepatitis C	11			
12	section.	12			
13	* * * * * *	13			
14	PAGE 122 LINE 8	14			
15	Q. (BY MR. WENDLER) Moving onto the	15			
16	discussion section. Again, I would ask that you read	16			
17	through that, and tell me if there is anything in	17			
18	there that you disagree with that Dr. Hull wrote?	18			
19	MS. DREW: I am going to instruct	19			
20	Dr. Jordan not to answer the question. It's an	20			
21	Inappropriate question, and asks her to assume	21			
22	evidence that she does not have. It causes her to	22			
23	speculate. And it's improper trying to get her to	23			
24	comment as a medical provider who's already testified	24			
	153				155
	May Reporting Service			May Reporting Service	,
1	her area of expertise is not Hepatitis, to comment on			3,110	

an expert who's basing his opinions, discussions on

records that Dr. Jordan has not had an opportunity to

review, evaluate, and/or consider.

б Therefore, I'm Instructing her not

to answer. 6

9

11

13 14

21

(BY MR. WENDLER) And again, you're not

going to answer based on the advice of Ms. Drew?

A. Correct.

10 Q, All right.

MR. WENDLER: Again, certify that

12 section of questions on the discussion section.

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#### PAGE 123 LINE 6

(BY MR. WENDLER) Then finally on the 15 Q. conclusions section, Dr. Jordan, Dr. Hull has listed three opinions there. Can you read through those opinions, and tell me if you agree or disagree with 18 those conclusions that he -- that is there in the 19

conclusion section? 20

MS. DREW: Same objections as

22 before. And I'm Instructing her not to answer.

23 (BY MR. WENDLER) And again, are you not

24 going to answer based on the advice of --

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